

**FEC
FORM 3X****REPORT OF RECEIPTS
AND DISBURSEMENTS**
For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines.

12FE4M5

American College of Cardiology Political Action Committee

ADDRESS (number and street)

2400 N St NW

☐ Check if different than previously reported. (ACC)

Washington

DC

20037-1153

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C C00375360

3. IS THIS
REPORT☒NEW
(N)

OR

☐AMENDED
(A)

4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:

☐ April 15
Quarterly Report (Q1)☐ July 15
Quarterly Report (Q2)☐ October 15
Quarterly Report (Q3)☐ January 31
Year-End Report (YE)☐ July 31 Mid-Year
Report (Non-election
Year Only) (MY)☐ Termination Report
(TER)(b) Monthly
Report
Due On:☐ Feb 20 (M2)☐ May 20 (M5)☐ Aug 20 (M8)☐ Nov 20 (M11)
(Non-Election
Year Only)☐ Mar 20 (M3)☐ Jun 20 (M6)☐ Sep 20 (M9)☐ Dec 20 (M12)
(Non-Election
Year Only)☐ Apr 20 (M4)☐ Jul 20 (M7)☒ Oct 20 (M10)☐ Jan 31 (YE)

(c) 12-Day

PRE-Election

Report for the:

☐ Primary (12P)☐ Convention (12C)☐ General (12G)☐ Special (12S)☐ Runoff (12R)

Election on

M M M / D D D / Y Y Y Y Y Y

in the
State of

(d) 30-Day

POST-Election

Report for the:

☐ General (30G)☐ Runoff (30R)☐ Special (30S)

Election on

M M M / D D D / Y Y Y Y Y Y

in the
State of

5. Covering Period

M M M / D D D / Y Y Y Y Y Y
09 01 2012

through

M M M / D D D / Y Y Y Y Y Y
09 30 2012

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer Carlton G. Davids

Signature of Treasurer

Carlton G. Davids

[Electronically Filed]

Date

M M M / D D D / Y Y Y Y Y Y
10 19 2012

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

Office
Use
Only**FEC FORM 3X**
Rev. 12/2004

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

American College of Cardiology Political Action Committee

Report Covering the Period: From: M M / D D / Y Y Y Y Y Y
09 / 01 / 2012 To: M M / D D / Y Y Y Y Y Y
09 / 30 / 2012

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, Y Y Y Y Y Y 2012		46353.91
(b) Cash on Hand at Beginning of Reporting Period.....	69716.23	
(c) Total Receipts (from Line 19)	71189.75	419376.52
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	140905.98	465730.43
7. Total Disbursements (from Line 31)	87095.13	411919.58
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	53810.85	53810.85
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	

☒ This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission
999 E Street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE of Receipts

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name

American College of Cardiology Political Action Committee

Report Covering the Period:

From:

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	01	/	2012

To:

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	30	/	2012

I. Receipts
COLUMN A
Total This Period

COLUMN B
Calendar Year-to-Date

11. Contributions (other than loans) From:

(a) Individuals/Persons Other

Than Political Committees

(i) Itemized (use Schedule A).....

61796.27

344478.30

(ii) Unitemized

8251.10

59608.58

(iii) TOTAL (add

Lines 11(a)(i) and (ii)..... ▶

70047.37

404086.88

(b) Political Party Committees

0.00

0.00

(c) Other Political Committees

(such as PACs).....

0.00

0.00

(d) Total Contributions (add Lines

11(a)(iii), (b), and (c)) (Carry

Totals to Line 33, page 5)

70047.37

404086.88

12. Transfers From Affiliated/Other

Party Committees.....

0.00

0.00

13. All Loans Received

0.00

0.00

14. Loan Repayments Received.....

0.00

0.00

15. Offsets To Operating Expenditures

(Refunds, Rebates, etc.)

(Carry Totals to Line 37, page 5).....

1142.38

14789.64

16. Refunds of Contributions Made

to Federal Candidates and Other

Political Committees.....

0.00

500.00

17. Other Federal Receipts

(Dividends, Interest, etc.).....

0.00

0.00

18. Transfers from Non-Federal and Levin Funds

(a) Non-Federal Account

(from Schedule H3)

0.00

0.00

(b) Levin Funds (from Schedule H5)

0.00

0.00

(c) Total Transfers (add 18(a) and 18(b))..

0.00

0.00

19. Total Receipts (add Lines 11(d),
12, 13, 14, 15, 16, 17, and 18(c))..... ▶

71189.75

419376.52

20. Total Federal Receipts

(subtract Line 18(c) from Line 19)

71189.75

419376.52

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures	1445.13	15061.25
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	1445.13	15061.25
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	85000.00	394000.00
24. Independent Expenditures (use Schedule E)	0.00	0.00
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	650.00	2858.33
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	650.00	2858.33
29. Other Disbursements	0.00	0.00
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	87095.13	411919.58
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	87095.13	411919.58

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	70047.37	404086.88
34. Total Contribution Refunds (from Line 28(d))	650.00	2858.33
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	69397.37	401228.55
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) ►	1445.13	15061.25
37. Offsets to Operating Expenditures (from Line 15, page 3).....	1142.38	14789.64
38. Net Operating Expenditures (subtract Line 37 from Line 36) ►	302.75	271.61

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 6 OF 79

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

American College of Cardiology Political Action Committee

Full Name (Last, First, Middle Initial)

A. Jesse E. Adams III, M.D.,

Mailing Address 1205 Isleworth Dr
Ste 400

City State Zip Code
Louisville KY 40245-5221

FEC ID number of contributing
federal political committee.

C

Name of Employer

Medical Center Cardiologists

Occupation

ADULT CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

791.69

Date of Receipt

09 / 17 / 2012

Transaction ID : 0CBC217378D1D2CD31A

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

B. Jesse E. Adams III, M.D.,

Mailing Address 1205 Isleworth Dr
Ste 400

City State Zip Code
Louisville KY 40245-5221

FEC ID number of contributing
federal political committee.

C

Name of Employer

Medical Center Cardiologists

Occupation

ADULT CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

791.69

Date of Receipt

09 / 30 / 2012

Transaction ID : 463AB21B7C9AD98B9D60

Amount of Each Receipt this Period

41.67

Full Name (Last, First, Middle Initial)

C. Anwar Ahmad M.B.B.S.,

Mailing Address 1801 S Florey Ave

City State Zip Code
Mount Pleasant TX 75455-5929

FEC ID number of contributing
federal political committee.

C

Name of Employer

Self-Employed

Occupation

ADULT CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

09 / 30 / 2012

Transaction ID : BA1963F4F4A8B8BEE5E

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

791.67

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

American College of Cardiology Political Action Committee

Full Name (Last, First, Middle Initial)

A. Jay H. Alexander M.D., F.A.

Mailing Address 2256 Carlyle Ct

City

Buffalo Grove

State

IL

Zip Code

60089-4695

FEC ID number of contributing
federal political committee.

C

Name of Employer

North Shore Cardiologists, SC

Occupation

ADULT CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2150.00

Date of Receipt

09 / 30 / 2012

Transaction ID : 4BBF8A88513194769C39

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

B. William Michael Allen M.D., F.A.

Mailing Address 1420 Pleasant Ridge Rd

City

Rogers

State

AR

Zip Code

72756-0618

FEC ID number of contributing
federal political committee.

C

Name of Employer

Self-Employed

Occupation

ADULT CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

09 / 17 / 2012

Transaction ID : 3798B5165EAB41D52EB

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

c. Rene J. Alvarez Jr., M.D.,

Mailing Address 425 McKean Dr

City

Wexford

State

PA

Zip Code

15090-7327

FEC ID number of contributing
federal political committee.

C

Name of Employer

University of Pittsburgh Medical Cente

Occupation

HEART FAILURE/TRANSPLANT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.06

Date of Receipt

09 / 21 / 2012

Transaction ID : 4A58BB529D331FB80953

Amount of Each Receipt this Period

83.34

SUBTOTAL of Receipts This Page (optional)..... ►

583.34

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

American College of Cardiology Political Action Committee

Full Name (Last, First, Middle Initial)

A. Lawrence C. Antonucci M.D., F.A.

Mailing Address 80 Tempe Wick Rd

City State Zip Code
Mendham NJ 07945-3227

FEC ID number of contributing
federal political committee.

C

Name of Employer

Self-Employed

Occupation

ADULT CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

09 / 24 / 2012

Transaction ID : 2C79D5647F0480B7612

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

B. Thomas E. Arend Jr., COO

Mailing Address 2400 N St NW

City State Zip Code
Washington DC 20037-1153

FEC ID number of contributing
federal political committee.

C

Name of Employer

American College of Cardiology

Occupation

Executive

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

09 / 18 / 2012

Transaction ID : 4FE99C2DFFFEEDF41845D

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

c. John D. Baker M.D., F.A.

Mailing Address 4790 Irvine Blvd
105-141

City State Zip Code
Irvine CA 92620-1973

FEC ID number of contributing
federal political committee.

C

Name of Employer

Pacific Cardiovascular Associates

Occupation

ADULT CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

09 / 17 / 2012

Transaction ID : 5D1DAC6BD0B653B2DB8

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

1500.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

 Use separate schedule(s)
 for each category of the
 Detailed Summary Page

 FOR LINE NUMBER:
 (check only one)

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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

American College of Cardiology Political Action Committee

Full Name (Last, First, Middle Initial)

A. Shyam Bhakta M.D., F.A.

Mailing Address 1502 Huntington Ln

City

Cleveland Heights

State

OH

Zip Code

44118-1539

 FEC ID number of contributing
 federal political committee.

C

Name of Employer

University Hospitals Medical Group

Occupation

INTERVENTIONAL CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	17	/	2012

Transaction ID : 97E7641A1A9FD6831CC

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

B. Gerald G. Blackwell M.D., F.A.

Mailing Address 1733 Orchard Pl

City

Kingsport

State

TN

Zip Code

37660-4523

 FEC ID number of contributing
 federal political committee.

C

Name of Employer

The Heart Center

Occupation

ADULT CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	24	/	2012

Transaction ID : 32BE67BC93459B75B9A

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

c. Nydia M. Bladuell M.D., F.A.

Mailing Address 235 Lindsey Pl NE

City

Marietta

State

GA

Zip Code

30067-4235

 FEC ID number of contributing
 federal political committee.

C

Name of Employer

East Cobb Cardiology

Occupation

ADULT CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	17	/	2012

Transaction ID : C896592D5DFFBB51A4D

Amount of Each Receipt this Period

500.00

SUBTOTAL of Receipts This Page (optional)..... ►

1750.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X)**ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

American College of Cardiology Political Action Committee

Full Name (Last, First, Middle Initial)

A. Kathleen Blake M.D., F.A.Mailing Address 15 Charles Plz
Apt 1402

City	State	Zip Code
Baltimore	MD	21201-3941

FEC ID number of contributing
federal political committee.

C

Name of Employer

Self-Employed

Occupation

ELECTROPHYSIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.05

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	13	/	2012

Transaction ID : 4604B529050A36153FD6

Amount of Each Receipt this Period

83.34

Full Name (Last, First, Middle Initial)

B. Alfred A. Bove M.D., Ph.D

Mailing Address 110 Anton Rd

City	State	Zip Code
Wynnewood	PA	19096-1226

FEC ID number of contributing
federal political committee.

C

Name of Employer

Temple University Hospital

Occupation

ADULT CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

800.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	09	/	2012

Transaction ID : 4BAB8747203D229B30AE

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

c. Ralph G. Brindis M.D., M.P.

Mailing Address 1410 Monterey Blvd

City	State	Zip Code
San Francisco	CA	94127-2554

FEC ID number of contributing
federal political committee.

C

Name of Employer

Kaiser Foundation Hospital

Occupation

INTERVENTIONAL CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

666.68

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	28	/	2012

Transaction ID : 455AB2D81B6BB1CBA6B3

Amount of Each Receipt this Period

83.34

SUBTOTAL of Receipts This Page (optional)..... ►

266.68

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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FOR LINE NUMBER:
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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

American College of Cardiology Political Action Committee

Full Name (Last, First, Middle Initial)

A. Alan S. Brown M.D., F.A.

Mailing Address 1912 Alta Vista Ct

City

Naperville

State

IL

Zip Code

60563-1815

FEC ID number of contributing
federal political committee.

C

Name of Employer

Midwest Heart SpecialistsEdward Heart

Occupation

ADULT CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

900.00

Date of Receipt

09 / 29 / 2012

Transaction ID : 4713A362573D9F53566D

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

B. Joseph G. Cacchione M.D., F.A.

Mailing Address 5740 Hickory Knoll Ct

City

Fairview

State

PA

Zip Code

16415-3246

FEC ID number of contributing
federal political committee.

C

Name of Employer

Cleveland Clinic Foundation

Occupation

ADULT CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.06

Date of Receipt

09 / 21 / 2012

Transaction ID : 49D797263379B6ED6F48

Amount of Each Receipt this Period

83.34

Full Name (Last, First, Middle Initial)

C. Eric B. Carlson M.D., F.A.

Mailing Address 4606 Whitby Pl

City

Greensboro

State

NC

Zip Code

27406-8600

FEC ID number of contributing
federal political committee.

C

Name of Employer

Self-Employed

Occupation

INTERVENTIONAL CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

09 / 30 / 2012

Transaction ID : 41278373169CA8C0780

Amount of Each Receipt this Period

500.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

683.34

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

American College of Cardiology Political Action Committee

Full Name (Last, First, Middle Initial)

A. Paul N. Casale M.D., F.A.

Mailing Address 1056 Buchanan Ave

City
LancasterState
PAZip Code
17603-3103FEC ID number of contributing
federal political committee.

C

Name of Employer

The Heart Group

Occupation

ADULT CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9		3	0		2	0	1	2

Transaction ID : 57C978AFB4C95AB1C9B

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

B. Peter J. Chaille M.D., F.A.

Mailing Address 427 Chestnut Forest Cv

City

Fort Wayne

State

IN

Zip Code

46814-8926

FEC ID number of contributing
federal political committee.

C

Name of Employer

Self-Employed

Occupation

INTERVENTIONAL CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

374.94

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9		0	3		2	0	1	2

Transaction ID : 472590E117960D82F421

Amount of Each Receipt this Period

41.66

Full Name (Last, First, Middle Initial)

c. Hollace D. Chastain II, M.D.,

Mailing Address 1819 Braemar Dr

City

Fort Wayne

State

IN

Zip Code

46814-9364

FEC ID number of contributing
federal political committee.

C

Name of Employer

Fort Wayne Cardiology

Occupation

ADULT CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

900.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9		2	9		2	0	1	2

Transaction ID : 4AA0BE4C9A4BEDE8D27E

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)..... ►

1141.66

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

American College of Cardiology Political Action Committee

Full Name (Last, First, Middle Initial)

A. Richard A. Chazal M.D., F.A.

Mailing Address 671 N Town and River Dr

City

Fort Myers

State

FL

Zip Code

33919-5931

FEC ID number of contributing
federal political committee.

C

Name of Employer

The Heart Group

Occupation

ADULT CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

666.64

Date of Receipt

09 / 07 / 2012

Transaction ID : 4CE5BDDF959813327987

Amount of Each Receipt this Period

83.33

Full Name (Last, First, Middle Initial)

B. Bernard A. Clark III, M.D.,

Mailing Address 95 Johnny Cake Ln

City

Glastonbury

State

CT

Zip Code

06033-2545

FEC ID number of contributing
federal political committee.

C

Name of Employer

St. Francis Hospital and Medical Cente

Occupation

ADULT CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

700.00

Date of Receipt

09 / 17 / 2012

Transaction ID : 3B6AE81412F9538AF92

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

c. Bernard A. Clark III, M.D.,

Mailing Address 114 Woodland St

City

Hartford

State

CT

Zip Code

06105-1208

FEC ID number of contributing
federal political committee.

C

Name of Employer

St. Francis Hospital and Medical Cente

Occupation

ADULT CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

700.00

Date of Receipt

09 / 29 / 2012

Transaction ID : 494C85193235D6469E67

Amount of Each Receipt this Period

50.00

SUBTOTAL of Receipts This Page (optional)..... ►

383.33

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

American College of Cardiology Political Action Committee

Full Name (Last, First, Middle Initial)

A. Anthony Clay D.O., F.A.

Mailing Address 411 Red Clay Dr

City

Kennett Square

State

PA

Zip Code

19348-2683

FEC ID number of contributing
federal political committee.

C

Name of Employer

Cardiology Physicians, P.A.

Occupation

ADULT CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

09 / 30 / 2012

Transaction ID : CFCAB86007951B10345

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

B. John J. Cogan M.D.

Mailing Address 88 Piikoi St
Apt 3707

City

Honolulu

State

HI

Zip Code

96814-4284

FEC ID number of contributing
federal political committee.

C

Name of Employer

Physician Office Building II

Occupation

INTERVENTIONAL CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.00

Date of Receipt

09 / 17 / 2012

Transaction ID : 45A80AD8E39D02BEE87

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

c. John J. Cogan M.D.

Mailing Address 88 Piikoi St
Apt 3707

City

Honolulu

State

HI

Zip Code

96814-4284

FEC ID number of contributing
federal political committee.

C

Name of Employer

Physician Office Building II

Occupation

INTERVENTIONAL CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.00

Date of Receipt

09 / 21 / 2012

Transaction ID : C7C146ED91FA0AE0F23

Amount of Each Receipt this Period

500.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

1250.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
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PAGE 15 OF 79

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

American College of Cardiology Political Action Committee

Full Name (Last, First, Middle Initial)

A. Lianna S. Collinge, CAE CAE, Unkno

Mailing Address 4014 88th Ave NW

City

Gig Harbor

State

WA

Zip Code

98335-6157

FEC ID number of contributing
federal political committee.

C

Name of Employer

Washington Chapter of the ACC

Occupation

ADMINISTRATION

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

808.00

Date of Receipt

09 / 14 / 2012

Transaction ID : 420E8ED448C3E5F77A8

Amount of Each Receipt this Period

90.00

Full Name (Last, First, Middle Initial)

B. George H. Crossley III, M.D.,

Mailing Address 276 Stratton Pl

City

Brentwood

State

TN

Zip Code

37027-4228

FEC ID number of contributing
federal political committee.

C

Name of Employer

St. Thomas Heart

Occupation

ELECTROPHYSIOLOGY

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2250.00

Date of Receipt

09 / 09 / 2012

Transaction ID : 4980A6D35685EAAE9C85

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

C. William J. David M.D., F.A.

Mailing Address 910 Williston Park Pt
Ste 1000

City

Lake Mary

State

FL

Zip Code

32746-2163

FEC ID number of contributing
federal political committee.

C

Name of Employer

The Cardiovascular Center, P.A.

Occupation

ADULT CARDIOLOGY

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1250.00

Date of Receipt

09 / 17 / 2012

Transaction ID : 8A03DBDB2D69382EC23

Amount of Each Receipt this Period

1250.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

1590.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

American College of Cardiology Political Action Committee

Full Name (Last, First, Middle Initial)

A. Stanley P. Defehr M.D., F.A.

Mailing Address 3140 SE Bison Rd

City

Bartlesville

State

OK

Zip Code

74006-7647

FEC ID number of contributing
federal political committee.

C

Name of Employer

Blue Stem Cardiology

Occupation

ADULT CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1250.00

Date of Receipt

09 / 17 / 2012

Transaction ID : 16BBBADAFA8B9146E5FB

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

B. Roger D. Des Prez M.D., F.A.

Mailing Address 5349 Oak Lake Ln

City

Tulsa

State

OK

Zip Code

74131-2656

FEC ID number of contributing
federal political committee.

C

Name of Employer

Oklahoma Heart Institute

Occupation

ADULT CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

09 / 17 / 2012

Transaction ID : FC12EBBB5C7D3B811EE

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

c. Thomas C. Dickinson M.D., F.A.

Mailing Address 1415 Magna Ct

City

Orlando

State

FL

Zip Code

32804-8048

FEC ID number of contributing
federal political committee.

C

Name of Employer

Self-Employed

Occupation

ADULT CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

09 / 30 / 2012

Transaction ID : FBE8D7F8471DAF3B89B

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

1000.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 17 OF 79
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

American College of Cardiology Political Action Committee

Full Name (Last, First, Middle Initial)

A. Benjamin V. DuBois M.D., F.A.

Mailing Address 5711 Chilham Rd

City

Baltimore

State

MD

Zip Code

21209-4415

FEC ID number of contributing
federal political committee.

C

Name of Employer

Self-Employed

Occupation

ADULT CARDIOLOGY

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

365.00

Date of Receipt

09 / 17 / 2012

Transaction ID : C1DAFF4A669EF57BDC4

Amount of Each Receipt this Period

365.00

Full Name (Last, First, Middle Initial)

B. Peter L. Duffy M.D., F.A.

Mailing Address 95 Cherry Hill Dr

City

Pinehurst

State

NC

Zip Code

28374-7119

FEC ID number of contributing
federal political committee.

C

Name of Employer

Self-Employed

Occupation

INTERVENTIONAL CARDIOLOGY

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

250.00

Date of Receipt

09 / 17 / 2012

Transaction ID : 03FCB908CCDD5C3388B

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

c. Claire S. Duvernoy M.D., F.A.

Mailing Address 456 Hilldale Dr

City

Ann Arbor

State

MI

Zip Code

48105-1121

FEC ID number of contributing
federal political committee.

C

Name of Employer

University of Michigan Health System

Occupation

INTERVENTIONAL CARDIOLOGY

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

500.00

Date of Receipt

09 / 17 / 2012

Transaction ID : C9F429AB3C97A5F0880

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

865.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

American College of Cardiology Political Action Committee

Full Name (Last, First, Middle Initial)

A. Sheldon B. Eisenberg M.D., F.A.

Mailing Address 18 Rose Ave

City

Woodcliff Lake

State

NJ

Zip Code

07677-7925

FEC ID number of contributing
federal political committee.

C

Name of Employer

Westwood Cardiology Associates

Occupation

ADULT CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9		2	4		2	0	1	2

Transaction ID : 4A579AC64104DA4F420

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

B. Blair D. Erb Jr., M.D.,Mailing Address 905 Highland Blvd
Ste 4330

City

Bozeman

State

MT

Zip Code

59715-6901

FEC ID number of contributing
federal political committee.

C

Name of Employer

Cardiology Consultants, P.A.

Occupation

ADULT CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

770.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9		0	9		2	0	1	2

Transaction ID : 42F7A40E04CCAD56C4A8

Amount of Each Receipt this Period

85.00

Full Name (Last, First, Middle Initial)

C. Richard Ericson M.D., F.A.

Mailing Address 2712 Lake Front Ct

City

Modesto

State

CA

Zip Code

95355-2262

FEC ID number of contributing
federal political committee.

C

Name of Employer

Valley Heart Assoc. Medical Group

Occupation

ADULT CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

295.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9		0	9		2	0	1	2

Transaction ID : 40B8A20F2BDCEFBDB31A

Amount of Each Receipt this Period

20.00

SUBTOTAL of Receipts This Page (optional)..... ►

1105.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X)

ITEMIZED RECEIPTS

Use separate schedule(s)
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Detailed Summary Page

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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

American College of Cardiology Political Action Committee

Full Name (Last, First, Middle Initial)

A. Richard Ericson M.D., F.A.

Mailing Address 2712 Lake Front Ct

City	State	Zip Code
Modesto	CA	95355-2262

FEC ID number of contributing federal political committee.

C

Name of Employer
Valley Heart Assoc. Medical Group

Occupation
ADULT CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

295.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	21	/	2012

Transaction ID : 4E51BDDFCAA52F298DDE

Amount of Each Receipt this Period

15.00

Full Name (Last, First, Middle Initial)

B. David M. Evans M.D., F.A.

Mailing Address 130 Ashlei Ln

City	State	Zip Code
Searcy	AR	72143-3024

FEC ID number of contributing federal political committee.

C

Name of Employer
Heart Clinic Arkansas

Occupation
ADULT CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

900.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	09	/	2012

Transaction ID : 4C43AF050960CFFD25A2

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

c. Chester J. Falterman M.D., F.A.

Mailing Address 1458 Avellino Cir

City	State	Zip Code
Murfreesboro	TN	37130-7608

FEC ID number of contributing federal political committee.

C

Name of Employer
Self-Employed

Occupation
ADULT CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1389.97

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	15	/	2012

Transaction ID : 42FC8323BEB0B6485759

Amount of Each Receipt this Period

80.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

195.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

American College of Cardiology Political Action Committee

Full Name (Last, First, Middle Initial)

A. Chester J. Falterman M.D., F.A.

Mailing Address 1458 Avellino Cir

City

Murfreesboro

State

TN

Zip Code

37130-7608

FEC ID number of contributing
federal political committee.

C

Name of Employer

Self-Employed

Occupation

ADULT CARDIOLOGY

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

1389.97

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9		2	5		2	0	1	2

Transaction ID : 485ABB28F1BA31B300DC

Amount of Each Receipt this Period

83.33

Full Name (Last, First, Middle Initial)

B. Susan I. Farkas M.D., F.A.

Mailing Address 1406 62nd Ave N

City

Fargo

State

ND

Zip Code

58102-6001

FEC ID number of contributing
federal political committee.

C

Name of Employer

Heart Center

Occupation

ADULT CARDIOLOGY

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9		1	7		2	0	1	2

Transaction ID : D77F2266225BD639FD7

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

C. James W. Fasules M.D., F.A.

Mailing Address 2718 Stephenson Ln NW

City

Washington

State

DC

Zip Code

20015-1504

FEC ID number of contributing
federal political committee.

C

Name of Employer

American College of Cardiology

Occupation

PEDIATRIC CARD.

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

1500.03

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9		0	9		2	0	1	2

Transaction ID : 403994D2B400CEA98ABE

Amount of Each Receipt this Period

166.67

SUBTOTAL of Receipts This Page (optional)..... ►

500.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
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NAME OF COMMITTEE (In Full)

American College of Cardiology Political Action Committee

Full Name (Last, First, Middle Initial)

A. Peter G. Fattal M.D., F.A.

Mailing Address 8 E Hannum Blvd

City

Saginaw

State

MI

Zip Code

48602-1910

FEC ID number of contributing
federal political committee.

C

Name of Employer

Michigan Cardiovascular Institute

Occupation

ADULT CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

09 / 17 / 2012

Transaction ID : 0D45EADBF6966D7C034

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

B. Victor A. Ferrari M.D.

Mailing Address 3400 Spruce St

City

Philadelphia

State

PA

Zip Code

19104-4208

FEC ID number of contributing
federal political committee.

C

Name of Employer

Hospital of the University of Pennsylv

Occupation

ADULT CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

09 / 09 / 2012

Transaction ID : 77966979-1F0B-4C81-

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

c. Scott H. Fertels D.O., F.A.

Mailing Address 418 Mill Creek Rd

City

Gladwyne

State

PA

Zip Code

19035-1519

FEC ID number of contributing
federal political committee.

C

Name of Employer

Self-Employed

Occupation

ADULT CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

09 / 23 / 2012

Transaction ID : ED2FF09F-29CC-4018-

Amount of Each Receipt this Period

1000.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

1750.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 22 OF 79

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

American College of Cardiology Political Action Committee

Full Name (Last, First, Middle Initial)

A. Kevin Fitzpatrick PA-C

Mailing Address 2400 N St NW

Heart House

City

Washington

State

DC

Zip Code

20037-1153

FEC ID number of contributing
federal political committee.

C

Name of Employer

American College of Cardiology

Occupation

ADMINISTRATION

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.01

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9		1	8		2	0	1	2

Transaction ID : 4377989951996F0E1B6C

Amount of Each Receipt this Period

83.34

Full Name (Last, First, Middle Initial)

B. Greg C. Flaker M.D., F.A.

Mailing Address 5 Hospital Dr

Ce351

City

Columbia

State

MO

Zip Code

65201-5276

FEC ID number of contributing
federal political committee.

C

Name of Employer

University of Missouri Medical Center

Occupation

ADULT CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9		1	7		2	0	1	2

Transaction ID : 20754AAFD2A9DD057B8

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

C. David Howard Forst M.D., F.A.

Mailing Address 936 S Bates St

City

Birmingham

State

MI

Zip Code

48009-1976

FEC ID number of contributing
federal political committee.

C

Name of Employer

Self-Employed

Occupation

ADULT CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9		1	7		2	0	1	2

Transaction ID : B20BF37A7EE8854A8B1

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional)..... ►

583.34

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

American College of Cardiology Political Action Committee

Full Name (Last, First, Middle Initial)

A. Edward T. A. Fry M.D., F.A.

Mailing Address 160 E 71st St

City

Indianapolis

State

IN

Zip Code

46220-1012

FEC ID number of contributing
federal political committee.

C

Name of Employer

The Care Group LLC

Occupation

INTERVENTIONAL CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2000.00

Date of Receipt

09 / 30 / 2012

Transaction ID : 3F7BC22402E51F98537

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

B. Gordon L. Fung M.D., F.A.

Mailing Address 1837 10th Ave
1609

City

San Francisco

State

CA

Zip Code

94122-4601

FEC ID number of contributing
federal political committee.

C

Name of Employer

UCSF Medical Center at Mt. Zion

Occupation

ADULT CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

749.97

Date of Receipt

09 / 07 / 2012

Transaction ID : 4ADBB7F52B11B878ADB

Amount of Each Receipt this Period

83.33

Full Name (Last, First, Middle Initial)

c. Suresh N. Gadasalli M.D., F.A.

Mailing Address 500 E 4th St

City

Odessa

State

TX

Zip Code

79761-5110

FEC ID number of contributing
federal political committee.

C

Name of Employer

Healthy Heart Center

Occupation

INTERVENTIONAL CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

09 / 21 / 2012

Transaction ID : 3E7205EDE227F563BA4

Amount of Each Receipt this Period

1000.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

2083.33

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

American College of Cardiology Political Action Committee

Full Name (Last, First, Middle Initial)

A. Cathy Gates

Mailing Address 17500 Ashton Forest Ter

City

Sandy Spring

State

MD

Zip Code

20860-3009

FEC ID number of contributing
federal political committee.

C

Name of Employer

American College of Cardiology

Occupation

Executive

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

09 / 18 / 2012

Transaction ID : 41C6B5350DE771CAA7B6

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

B. Osvaldo S. Gigliotti M.D., F.A.

Mailing Address 2310 Pruett St

City

Austin

State

TX

Zip Code

78703-4338

FEC ID number of contributing
federal political committee.

C

Name of Employer

Seton Heart Institute

Occupation

INTERVENTIONAL CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

09 / 17 / 2012

Transaction ID : E2F38C74BE490517C54

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

C. Michael F. Gilson M.D., F.A.

Mailing Address 100 Prospect St

City

Providence

State

RI

Zip Code

02906-1446

FEC ID number of contributing
federal political committee.

C

Name of Employer

Self-Employed

Occupation

ADULT CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

900.00

Date of Receipt

09 / 03 / 2012

Transaction ID : 4875BE746181260EF461

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

600.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
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NAME OF COMMITTEE (In Full)

American College of Cardiology Political Action Committee

Full Name (Last, First, Middle Initial)

A. Rama M. Godishala M.B.B.S.,

Mailing Address 281 Grant Ave

City

Auburn

State

NY

Zip Code

13021-1421

FEC ID number of contributing
federal political committee.

C

Name of Employer

Auburn Cardiology Associates

Occupation

ADULT CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

09 / 17 / 2012

Transaction ID : D66872F0BD87DD7BC22

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

B. Samuel D. Goldberg M.D., F.A.

Mailing Address 8512 Atwell Rd

City

Potomac

State

MD

Zip Code

20854-6234

FEC ID number of contributing
federal political committee.

C

Name of Employer

Maryland Heart, P.C.

Occupation

ADULT CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

270.00

Date of Receipt

09 / 21 / 2012

Transaction ID : 4E3F947E76DBF18CD245

Amount of Each Receipt this Period

30.00

Full Name (Last, First, Middle Initial)

c. Allen L. Goree MHA,CMPE

Mailing Address 1605 E Broadway
Ste 300

City

Columbia

State

MO

Zip Code

65201-8023

FEC ID number of contributing
federal political committee.

C

Name of Employer

Missouri Heart Center

Occupation

ADMINISTRATION

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

09 / 17 / 2012

Transaction ID : F38CDB6C39454C06738

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

1280.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

American College of Cardiology Political Action Committee

Full Name (Last, First, Middle Initial)

A. Lee W. Gould M.D., F.A.

Mailing Address 3865 Country Club Dr

City

Lewiston

State

ID

Zip Code

83501-9622

FEC ID number of contributing
federal political committee.

C

Name of Employer

Self-Employed

Occupation

ADULT CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.06

Date of Receipt

09 / 21 / 2012

Transaction ID : 4CD5B6C827C8C24522AE

Amount of Each Receipt this Period

83.34

Full Name (Last, First, Middle Initial)

B. Karanvir S. Grewal M.D., F.A.

Mailing Address 3705 Olentangy River Rd
Ste 100

City

Columbus

State

OH

Zip Code

43214-3467

FEC ID number of contributing
federal political committee.

C

Name of Employer

Mid-Ohio Cardiology

Occupation

ADULT CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

09 / 17 / 2012

Transaction ID : FF44684C27CB7D05C7B

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

C. Dale A. Hansen M.D., F.A.

Mailing Address 5421 S 61st Court

City

Lincoln

State

NE

Zip Code

68516

FEC ID number of contributing
federal political committee.

C

Name of Employer

Bryan LGH Heart Institute

Occupation

ADULT CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

09 / 18 / 2012

Transaction ID : 48FA81F783E60B87895A

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

583.34

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 27 OF 79

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

American College of Cardiology Political Action Committee

Full Name (Last, First, Middle Initial)

A. David P. Hedrick M.D., F.A.

Mailing Address 5475 N Woods Ln
Ste 301

City State Zip Code
Solon OH 44139-1199

FEC ID number of contributing
federal political committee.

C

Name of Employer

Self-Employed

Occupation

INTERVENTIONAL CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

09 / 17 / 2012

Transaction ID : 71CE149157C1471B876

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

B. Shyla T. High M.D., F.A.

Mailing Address 1320 Adair St

City State Zip Code
Dallas TX 75204-6117

FEC ID number of contributing
federal political committee.

C

Name of Employer

Cardiology Consultants of Texas

Occupation

ADULT CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

09 / 17 / 2012

Transaction ID : CD7C273F07E5EDB7CAF

Amount of Each Receipt this Period

300.00

Full Name (Last, First, Middle Initial)

C. J. Daniel Hill Jr., M.D.,

Mailing Address 281 Monte Vista Ridge Rd

City State Zip Code
Orinda CA 94563-1627

FEC ID number of contributing
federal political committee.

C

Name of Employer

Berkeley Cardiovascular Medical Group

Occupation

ADULT CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

09 / 30 / 2012

Transaction ID : 03515DC971FE272EE65

Amount of Each Receipt this Period

500.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

1300.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

American College of Cardiology Political Action Committee

Full Name (Last, First, Middle Initial)

A. Jerome L. Hines M.D., Ph.D

Mailing Address 11 Salt Creek Ln
Ste 2

City Hinsdale State IL Zip Code 60521-3032

FEC ID number of contributing
federal political committee.

C

Name of Employer
Illinois Heart & Vascular

Occupation
ADULT CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.06

Date of Receipt

09 / 21 / 2012

Transaction ID : 4924A767A07AB8228017

Amount of Each Receipt this Period

83.34

Full Name (Last, First, Middle Initial)

B. Robert E. Hobbs M.D., F.A.

Mailing Address 2713 Dryden Rd

City Shaker Heights State OH Zip Code 44122-2701

FEC ID number of contributing
federal political committee.

C

Name of Employer
Cleveland Clinic

Occupation
HEART FAILURE/TRANSPLANT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.06

Date of Receipt

09 / 21 / 2012

Transaction ID : 4740A420A4996F0ED436

Amount of Each Receipt this Period

83.34

Full Name (Last, First, Middle Initial)

C. David M. Hodges M.D., F.A.

Mailing Address 875 Prince St

City Teaneck State NJ Zip Code 07666-4412

FEC ID number of contributing
federal political committee.

C

Name of Employer

Self-Employed

Occupation
ADULT CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

09 / 17 / 2012

Transaction ID : C4673A4969EE7A7FE72

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional)..... ►

416.68

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

American College of Cardiology Political Action Committee

Full Name (Last, First, Middle Initial)

A. John C. Holmes M.D., F.A.

Mailing Address 694 Canterbury Dr

City

Edgewood

State

KY

Zip Code

41017-8133

FEC ID number of contributing
federal political committee.

C

Name of Employer

Cardiology Associates

Occupation

ADULT CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

09 / 30 / 2012

Transaction ID : 04306E06BB277B07253

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

B. Kenneth Christopher Huber M.D., F.A.

Mailing Address 4330 Wornall Rd
Ste 2000

City

Kansas City

State

MO

Zip Code

64111-5939

FEC ID number of contributing
federal political committee.

C

Name of Employer

Cardiovascular Consults., Inc.

Occupation

INTERVENTIONAL CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

09 / 17 / 2012

Transaction ID : AAAA54892BEC204B339

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

C. Daniel J. Humiston M.D., F.A.

Mailing Address 1928 Maple Hollow Way

City

Bountiful

State

UT

Zip Code

84010-1041

FEC ID number of contributing
federal political committee.

C

Name of Employer

Utah Cardiology, PC

Occupation

ADULT CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1125.00

Date of Receipt

09 / 21 / 2012

Transaction ID : 43EFA0709489017258D3

Amount of Each Receipt this Period

125.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

875.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 30 OF 79
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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

American College of Cardiology Political Action Committee

Full Name (Last, First, Middle Initial)

A. David G. Ike M.D., F.A.

Mailing Address 1083 Boiling Springs Rd

City

Spartanburg

State

SC

Zip Code

29303-2248

FEC ID number of contributing
federal political committee.

C

Name of Employer

Cardiology Consultants, P.A.

Occupation

ADULT CARDIOLOGY

Receipt For:

☐ Primary
☐ Other (specify) ▼
☐ General

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			2	6			2	0	1	2		

Transaction ID : F4BD720D-8E10-47F0-

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

B. John G. Ivanoff M.D., F.A.

Mailing Address 11516 S Hudson Ave

City

Tulsa

State

OK

Zip Code

74137-8104

FEC ID number of contributing
federal political committee.

C

Name of Employer

Self-Employed

Occupation

ADULT CARDIOLOGY

Receipt For:

☐ Primary
☐ Other (specify) ▼
☐ General

Aggregate Year-to-Date ▼

375.00

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			3	0			2	0	1	2		

Transaction ID : 1F58DFA0C36CAF58CE0

Amount of Each Receipt this Period

375.00

Full Name (Last, First, Middle Initial)

C. Pamela A. Ivey M.D., F.A.

Mailing Address 52 Quail Run Rd

City

Henderson

State

NV

Zip Code

89014-2148

FEC ID number of contributing
federal political committee.

C

Name of Employer

Cardiovascular Consultants of Nevada

Occupation

CLINICAL CARDIOLOGY/GENERAL CARDIO

Receipt For:

☐ Primary
☐ Other (specify) ▼
☐ General

Aggregate Year-to-Date ▼

1890.00

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			2	1			2	0	1	2		

Transaction ID : 4A82A0DEC875113C9052

Amount of Each Receipt this Period

210.00

SUBTOTAL of Receipts This Page (optional)..... ►

1085.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

American College of Cardiology Political Action Committee

Full Name (Last, First, Middle Initial)

A. Jay A. Jackson M.D., F.A.

Mailing Address 3610 Wyncote Ln

City

State

Zip Code

Fairway

KS

66205-2739

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Self-Employed

ADULT CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

09 / 30 / 2012

Transaction ID : D57A00F6CFC8DDA5EE7

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

B. Walter E. James M.D., F.A.

Mailing Address 106 Fair Oaks Ln

City

State

Zip Code

Greenwood

SC

29646-9273

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Piedmont Cardiology Assoc

ADULT CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

09 / 30 / 2012

Transaction ID : 88ED334B3BBBCCFE325

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

c. C. David Joffe M.D., F.A.

Mailing Address 7067 Meeker Commons Ln

City

State

Zip Code

Dayton

OH

45414-2065

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Dayton Heart Center, Inc.

INTERVENTIONAL CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

09 / 30 / 2012

Transaction ID : 4B379F8B6F0AAE249773

Amount of Each Receipt this Period

50.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

1300.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

American College of Cardiology Political Action Committee

Full Name (Last, First, Middle Initial)

A. Samuel O. Jones IV, M.D.

Mailing Address 302 Argo Ave

San Antonio Military Medical Center

City

San Antonio

State

TX

Zip Code

78209-5115

FEC ID number of contributing
federal political committee.

C

Name of Employer

San Antonio Military Medical Center

Occupation

ELECTROPHYSIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

09 / 17 / 2012

Transaction ID : C3157F6392698F719DC

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

B. Georges I. Kaddissi M.D., F.A.

Mailing Address 703 Commonwealth Dr

City

Moorestown

State

NJ

Zip Code

08057-4417

FEC ID number of contributing
federal political committee.

C

Name of Employer

Cardiovascular Associates of Delaware

Occupation

ADULT CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

09 / 23 / 2012

Transaction ID : D81E5914-238F-473E-

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

c. Richard E. Katholi M.D., F.A.

Mailing Address 1989 Outer Park Dr

City

Springfield

State

IL

Zip Code

62704-3387

FEC ID number of contributing
federal political committee.

C

Name of Employer

Prairie Cardiovascular Consultants Ltd

Occupation

ADULT CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

09 / 30 / 2012

Transaction ID : 036AF60E7A64983C8EB

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

1500.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

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NAME OF COMMITTEE (In Full)

American College of Cardiology Political Action Committee

Full Name (Last, First, Middle Initial)

A. Sanjiv Kaul M.D., F.A.

Mailing Address 2010 SW Carter Ln

City

Portland

State

OR

Zip Code

97201-2411

FEC ID number of contributing
federal political committee.

C

Name of Employer

Oregon Health & Science University

Occupation

ADULT CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

09 / 30 / 2012

Transaction ID : DA314B61DF5E84AF6D2

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

B. Jerry D. Kennett M.D., M.A.

Mailing Address 4614 Copperstone Ct

City

Columbia

State

MO

Zip Code

65203-1696

FEC ID number of contributing
federal political committee.

C

Name of Employer

Missouri Cardiovascular Specialists

Occupation

ADULT CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3000.00

Date of Receipt

09 / 21 / 2012

Transaction ID : C124CF9222BF63B1091

Amount of Each Receipt this Period

1500.00

Full Name (Last, First, Middle Initial)

C. David W. Kohl M.D., F.A.

Mailing Address 400 Beach Dr NE - Unit 2805

City

Saint Petersburg

State

FL

Zip Code

33701

FEC ID number of contributing
federal political committee.

C

Name of Employer

Self-Employed

Occupation

INTERVENTIONAL CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

09 / 30 / 2012

Transaction ID : 534CC39D5B77E1DF7C3

Amount of Each Receipt this Period

1000.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

3000.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

American College of Cardiology Political Action Committee

Full Name (Last, First, Middle Initial)

A. Steven E. Kornberg M.D., F.A.

Mailing Address 10 E New York Ave
Ste 2

City Somers Point State NJ Zip Code 08244-2367

FEC ID number of contributing
federal political committee.

C

Name of Employer

Shore Heart Consultants, LLC

Occupation

ADULT CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

374.94

Date of Receipt

09 / 18 / 2012

Transaction ID : 47FCB8F16311E0DF7DE6

Amount of Each Receipt this Period

41.66

Full Name (Last, First, Middle Initial)

B. David O. Kovacich M.D., F.A.

Mailing Address 5251 Cheyenne Moon

City Carmel State IN Zip Code 46033-8897

FEC ID number of contributing
federal political committee.

C

Name of Employer

Indiana Heart Physicians, Inc

Occupation

ADULT CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

09 / 30 / 2012

Transaction ID : 57CC6C9FC8353744A71

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

C. Gilead I. Lancaster M.D., F.A.

Mailing Address 15 Mine Hill Rd

City Redding State CT Zip Code 06896-2701

FEC ID number of contributing
federal political committee.

C

Name of Employer

Bridgeport Hospital Dept of Echo

Occupation

ADULT CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

900.00

Date of Receipt

09 / 21 / 2012

Transaction ID : 41A0BB7DE0E534FADA87

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

641.66

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

American College of Cardiology Political Action Committee

Full Name (Last, First, Middle Initial)

A. John J. Layden M.D., F.A.

Mailing Address 29 Honey Hollow Rd

City

Queensbury

State

NY

Zip Code

12804-9117

FEC ID number of contributing
federal political committee.

C

Name of Employer

Adirondack Cardiology Assoc.,PC

Occupation

ADULT CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

09 / 17 / 2012

Transaction ID : DED255E1A20EAE42042

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

B. Gilbert A. Leidig Jr., M.D.,

Mailing Address 1 Centurian Dr
Ste 200

City

Newark

State

DE

Zip Code

19713-2150

FEC ID number of contributing
federal political committee.

C

Name of Employer

Cardiology Physicians, P.A.Abby Medica

Occupation

INTERVENTIONAL CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

09 / 28 / 2012

Transaction ID : C852D58D011D68B1F2D

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

c. Roger F. Leonard M.D., F.A.

Mailing Address 11706 Split Tree Cir

City

Potomac

State

MD

Zip Code

20854-2880

FEC ID number of contributing
federal political committee.

C

Name of Employer

Montgomery General Hospital

Occupation

ADMINISTRATION

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

09 / 17 / 2012

Transaction ID : 5E18EC665C82E9F2D05

Amount of Each Receipt this Period

1000.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

2250.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

American College of Cardiology Political Action Committee

Full Name (Last, First, Middle Initial)

A. Thomas J. Lewandowski M.D., F.A.

Mailing Address 113 Limekiln Dr

City

Neenah

State

WI

Zip Code

54956-4213

FEC ID number of contributing
federal political committee.

C

Name of Employer

Appleton Cardiology ThedaCare

Occupation

ADULT CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1400.00

Date of Receipt

09 / 17 / 2012

Transaction ID : 1BE46FAB3E3B547A446

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

B. Thomas J. Lewandowski M.D., F.A.

Mailing Address 113 Limekiln Dr

City

Neenah

State

WI

Zip Code

54956-4213

FEC ID number of contributing
federal political committee.

C

Name of Employer

Appleton Cardiology ThedaCare

Occupation

ADULT CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1400.00

Date of Receipt

09 / 21 / 2012

Transaction ID : 479D9BE326978F74D141

Amount of Each Receipt this Period

150.00

Full Name (Last, First, Middle Initial)

C. Sandra J. Lewis M.D., F.A.

Mailing Address 5342 SW Hewett Blvd

City

Portland

State

OR

Zip Code

97221-2254

FEC ID number of contributing
federal political committee.

C

Name of Employer

NW Cardiovascular Institute

Occupation

CLINICAL CARDIOLOGY/GENERAL CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.06

Date of Receipt

09 / 09 / 2012

Transaction ID : 41C4BD88A0FA893A12FA

Amount of Each Receipt this Period

83.34

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

283.34

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

American College of Cardiology Political Action Committee

Full Name (Last, First, Middle Initial)

A. William R. Lewis M.D., F.A.

Mailing Address 24707 Tricia Dr

City

Westlake

State

OH

Zip Code

44145-4923

FEC ID number of contributing
federal political committee.

C

Name of Employer

Metro Health Medical Center

Occupation

ADULT CARDIOLOGY

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

315.00

Date of Receipt

09 / 30 / 2012

Transaction ID : 4D4990C1F2BCEB8B1F16

Amount of Each Receipt this Period

45.00

Full Name (Last, First, Middle Initial)

B. Albert C. Lin M.D., F.A.

Mailing Address 676 N Saint Clair St
Ste 600

City

Chicago

State

IL

Zip Code

60611-2981

FEC ID number of contributing
federal political committee.

C

Name of Employer

Northwestern Medical Faculty Foundatio

Occupation

ELECTROPHYSIOLOGY

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

365.00

Date of Receipt

09 / 17 / 2012

Transaction ID : 752160B1D98F0C2983C

Amount of Each Receipt this Period

365.00

Full Name (Last, First, Middle Initial)

C. Michael A. Love M.D.

Mailing Address 835 Windy Hill Dr

City

Chattanooga

State

TN

Zip Code

37421-4568

FEC ID number of contributing
federal political committee.

C

Name of Employer

Cardiovascular Care Center, PLLC

Occupation

ADULT CARDIOLOGY

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

250.00

Date of Receipt

09 / 30 / 2012

Transaction ID : ED98B2B1D1A945F2BE1

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

660.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

American College of Cardiology Political Action Committee

Full Name (Last, First, Middle Initial)

A. Jerre F. Lutz M.D., F.A.

Mailing Address 4627 Shiloh Ridge Trl

City

Snellville

State

GA

Zip Code

30039-8572

FEC ID number of contributing
federal political committee.

C

Name of Employer

Emory University School of MedicineDep

Occupation

ADULT CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.00

Date of Receipt

09 / 30 / 2012

Transaction ID : DC1EB8C8ED752D1AF25

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

B. Jerre F. Lutz M.D., F.A.

Mailing Address 4627 Shiloh Ridge Trl

City

Snellville

State

GA

Zip Code

30039-8572

FEC ID number of contributing
federal political committee.

C

Name of Employer

Emory University School of MedicineDep

Occupation

ADULT CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.00

Date of Receipt

09 / 30 / 2012

Transaction ID : E1919EE03082B96DDC8

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

c. Kathleen E. Magness M.D., F.A.

Mailing Address 3014 Hollow Rd

City

Malvern

State

PA

Zip Code

19355-8660

FEC ID number of contributing
federal political committee.

C

Name of Employer

Clinical Care Associates/ PMA Medical

Occupation

ADULT CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

09 / 30 / 2012

Transaction ID : 72A4F7D812C03F0959E

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

1000.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

American College of Cardiology Political Action Committee

Full Name (Last, First, Middle Initial)

A. Timothy Malins M.D., F.A.

Mailing Address 49 Fairhaven Rd

City

Rochester

State

NY

Zip Code

14610-2229

FEC ID number of contributing
federal political committee.

C

Name of Employer

Rochester General Hospital

Occupation

ADULT CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

365.00

Date of Receipt

09 / 30 / 2012

Transaction ID : 9A888AA73D11B574AC4

Amount of Each Receipt this Period

365.00

Full Name (Last, First, Middle Initial)

B. Sunil V. Mankad M.D., F.A.

Mailing Address 200 1st St SW

Gonda 5 South Room 5-209

City

Rochester

State

MN

Zip Code

55905-0001

FEC ID number of contributing
federal political committee.

C

Name of Employer

Mayo Clinic

Occupation

ADULT CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

09 / 17 / 2012

Transaction ID : F2946D2FA6BCA39D251

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

c. John E. Mayer Jr., M.D.,

Mailing Address 44 Skyline Dr

City

Wellesley

State

MA

Zip Code

02482-7214

FEC ID number of contributing
federal political committee.

C

Name of Employer

Childrens Hospital

Occupation

CONGENITAL CARDIAC SURGERY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.00

Date of Receipt

09 / 30 / 2012

Transaction ID : A1012310F140BE859F3

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

865.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

American College of Cardiology Political Action Committee

Full Name (Last, First, Middle Initial)

A. Melissa Lynn McKernan M.D., F.A.

Mailing Address 1409 Ridge Rd

City
Lancaster

State
PA

Zip Code
17603-4735

FEC ID number of contributing
federal political committee.

C

Name of Employer

The Heart Group

Occupation

ELECTROPHYSIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

09 / 30 / 2012

Transaction ID : 92BFB44E4E51429004D

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

B. Michael R. McMullan M.D., F.A.

Mailing Address 970 Lakeland Drive, Suite 61

City
Ridgeland

State
MS

Zip Code
39157-9709

FEC ID number of contributing
federal political committee.

C

Name of Employer

Self-Employed

Occupation

ADULT CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

09 / 21 / 2012

Transaction ID : 61B6BEB20B9739A976A

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

C. Albert B. Mercer M.D., F.A.

Mailing Address 1120 Griffith Ave

City
Owensboro

State
KY

Zip Code
42301-2812

FEC ID number of contributing
federal political committee.

C

Name of Employer

Green River Heart Institute

Occupation

INTERVENTIONAL CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

900.00

Date of Receipt

09 / 19 / 2012

Transaction ID : 48A496CE1FEBA3A769E1

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

850.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

American College of Cardiology Political Action Committee

Full Name (Last, First, Middle Initial)

A. John C. Messenger M.D., F.A.

Mailing Address 12401 E 17th Ave
Box B132

City Aurora State CO Zip Code 80045-2589

FEC ID number of contributing
federal political committee.

C

Name of Employer

University of Colorado

Occupation

INTERVENTIONAL CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

09 / 08 / 2012

Transaction ID : 11450052-CE33-4EBA-

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

B. Matthew J. Mick M.D., F.A.

Mailing Address 6175 Riverlake Blvd

City Bartow State FL Zip Code 33830-7754

FEC ID number of contributing
federal political committee.

C

Name of Employer

Self-Employed

Occupation

INTERVENTIONAL CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

09 / 17 / 2012

Transaction ID : 1F46DCE46346210154F

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

c. Margo B. Minissian ACNP-BC, M

Mailing Address 444 S San Vicente Blvd
Ste 600

City Los Angeles State CA Zip Code 90048-4174

FEC ID number of contributing
federal political committee.

C

Name of Employer

Cedars Sinai Heart Institute Womens He

Occupation

PREVENTIVE CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1666.72

Date of Receipt

09 / 29 / 2012

Transaction ID : 47E780D0F897599C2226

Amount of Each Receipt this Period

208.34

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

958.34

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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NAME OF COMMITTEE (In Full)

American College of Cardiology Political Action Committee

Full Name (Last, First, Middle Initial)

A. Marc A. Mugmon M.D., F.A.

Mailing Address 7193 Collingwood Ct

City

Elkridge

State

MD

Zip Code

21075-5548

FEC ID number of contributing
federal political committee.

C

Name of Employer

Chesapeake CardioVascular Associates

Occupation

ADULT CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.06

Date of Receipt

09 / 30 / 2012

Transaction ID : 4674B9B7DE08C83993EB

Amount of Each Receipt this Period

83.34

Full Name (Last, First, Middle Initial)

B. Srinivas Murali M.B.B.S.,

Mailing Address 320 E North Ave

16th Floor South Tower

City

Pittsburgh

State

PA

Zip Code

15212-4756

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allegheny General Hospital

Occupation

ADULT CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

09 / 17 / 2012

Transaction ID : 4067BE36D24F39463A5

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

c. Donald A. Page M.D., F.A.

Mailing Address 55 Whitcher St NE

Ste 350

City

Marietta

State

GA

Zip Code

30060-1129

FEC ID number of contributing
federal political committee.

C

Name of Employer

Wellstar Cardiovascular Medicine

Occupation

ADULT CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

09 / 17 / 2012

Transaction ID : 1A165AF3624AC06A6DF

Amount of Each Receipt this Period

300.00

SUBTOTAL of Receipts This Page (optional)..... ►

1383.34

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

American College of Cardiology Political Action Committee

Full Name (Last, First, Middle Initial)

A. Walter A. Parham M.D., F.A.

Mailing Address 958 Cabernet Dr

City

State

Zip Code

Town And Country

MO

63017-8305

FEC ID number of contributing
federal political committee.

C

Name of Employer

Mercy Cardiology Clinic

Occupation

ADULT CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

365.00

Date of Receipt

09 / 30 / 2012

Transaction ID : 11289BE0D625E3DE3EA

Amount of Each Receipt this Period

365.00

Full Name (Last, First, Middle Initial)

B. Hanoch Patt M.D.

Mailing Address 330 South Northland Drive

City

State

Zip Code

Austin

TX

78731

FEC ID number of contributing
federal political committee.

C

Name of Employer

Pediatrix Medical Group

Occupation

PEDIATRIC CARD.

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

09 / 17 / 2012

Transaction ID : 4E527AD5340400DE91D

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

C. John W. Pickrell M.D., F.A.

Mailing Address 1909 Elkhorn Valley Dr

City

State

Zip Code

Casper

WY

82609-4620

FEC ID number of contributing
federal political committee.

C

Name of Employer

Wyoming CardioPulmonary

Occupation

CLINICAL CARDIOLOGY/GENERAL CARDIO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

730.00

Date of Receipt

09 / 17 / 2012

Transaction ID : 52384A53C159C0B1A42

Amount of Each Receipt this Period

50.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

665.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

American College of Cardiology Political Action Committee

Full Name (Last, First, Middle Initial)

A. John W. Pickrell M.D., F.A.

Mailing Address 1909 Elkhorn Valley Dr

City

Casper

State

WY

Zip Code

82609-4620

FEC ID number of contributing
federal political committee.

C

Name of Employer

Wyoming CardioPulmonary

Occupation

CLINICAL CARDIOLOGY/GENERAL CARDIO

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

730.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9		1	8		2	0	1	2

Transaction ID : 4E9FAD85B715E526E00B

Amount of Each Receipt this Period

85.00

Full Name (Last, First, Middle Initial)

B. David J. Pinnelas M.D., F.A.

Mailing Address 2 Hopi Ct

City

Manalapan

State

NJ

Zip Code

07726-4628

FEC ID number of contributing
federal political committee.

C

Name of Employer

Shore Heart Group

Occupation

INTERVENTIONAL CARDIOLOGY

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

601.66

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9		0	9		2	0	1	2

Transaction ID : 4C069F268E3B93B0364F

Amount of Each Receipt this Period

70.00

Full Name (Last, First, Middle Initial)

c. Christopher D. Powers M.D., F.A.

Mailing Address 13959 Meadow Grass Way

City

Fishers

State

IN

Zip Code

46038-8221

FEC ID number of contributing
federal political committee.

C

Name of Employer

Self-Employed

Occupation

ADULT CARDIOLOGY

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9		1	7		2	0	1	2

Transaction ID : E202A8BC52E91771DFD

Amount of Each Receipt this Period

300.00

SUBTOTAL of Receipts This Page (optional)..... ►

455.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

American College of Cardiology Political Action Committee

Full Name (Last, First, Middle Initial)

A. James B. Powers M.D., F.A.

Mailing Address 11 Bowdoin Dr

City

Falmouth

State

ME

Zip Code

04105-2557

FEC ID number of contributing
federal political committee.

C

Name of Employer

Maine Cardiology Associates

Occupation

ADULT CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

900.00

Date of Receipt

09 / 21 / 2012

Transaction ID : 43068773F51C74387D6B

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

B. Geetha Raghuvver M.B.B.S.,

Mailing Address 5354 Mission Woods Rd

City

Shawnee Mission

State

KS

Zip Code

66205-2008

FEC ID number of contributing
federal political committee.

C

Name of Employer

Children's Mercy Hospital

Occupation

PEDIATRIC CARD.

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

09 / 17 / 2012

Transaction ID : A0B589945447F4896C3

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

c. Narasimha P. Rao M.B.B.S.,

Mailing Address 1180 N Indian Canyon Dr
Ste E319

City

Palm Springs

State

CA

Zip Code

92262-4809

FEC ID number of contributing
federal political committee.

C

Name of Employer

Desert Heart Physicians

Occupation

ADULT CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

09 / 28 / 2012

Transaction ID : 3D2CB6AFC7E4CBC6089

Amount of Each Receipt this Period

500.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

850.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

American College of Cardiology Political Action Committee

Full Name (Last, First, Middle Initial)

A. Sanjeev Dhari Ravipudi M.D., F.A.

Mailing Address 2317 Deer Creek Ct

City
Columbia

State
MO

Zip Code
65201-3564

FEC ID number of contributing
federal political committee.

C

Name of Employer

Missouri Cardiovascular Specialists

Occupation

INTERVENTIONAL CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.00

Date of Receipt

09 / 30 / 2012

Transaction ID : CA3FD8D4E079ABD3993

Amount of Each Receipt this Period

750.00

Full Name (Last, First, Middle Initial)

B. Gregg J. Reis M.D., F.A.

Mailing Address 11 Seven Springs Rd

City
Wayne

State
PA

Zip Code
19087-2813

FEC ID number of contributing
federal political committee.

C

Name of Employer

Phoenixville Hospital

Occupation

ADULT CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

365.00

Date of Receipt

09 / 30 / 2012

Transaction ID : E86363E657B0DEE312F

Amount of Each Receipt this Period

365.00

Full Name (Last, First, Middle Initial)

C. Arthur Brian Reitman M.D., F.A.

Mailing Address 55 Whitcher St NE
Ste 350

City
Marietta

State
GA

Zip Code
30060-1129

FEC ID number of contributing
federal political committee.

C

Name of Employer

Wellstar Cardiovascular Medicine

Occupation

ADULT CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

09 / 17 / 2012

Transaction ID : 0D4E4D6710E5CF990E9

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

1365.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

American College of Cardiology Political Action Committee

Full Name (Last, First, Middle Initial)

A. Mary D. Restifo M.D., F.A.

Mailing Address 5729 MacArthur Blvd NW

City

Washington

State

DC

Zip Code

20016-5304

FEC ID number of contributing
federal political committee.

C

Name of Employer

Self-Employed

Occupation

ADULT CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

09 / 30 / 2012

Transaction ID : 86621774F02B46F4BBE

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

B. Michael E. Ring M.D., F.A.

Mailing Address 122 W 7th Ave
Ste 450

City

Spokane

State

WA

Zip Code

99204-2339

FEC ID number of contributing
federal political committee.

C

Name of Employer

Heart Clinics Northwest

Occupation

INTERVENTIONAL CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.06

Date of Receipt

09 / 21 / 2012

Transaction ID : 4DC5B5950DB69F4F7E7B

Amount of Each Receipt this Period

83.34

Full Name (Last, First, Middle Initial)

C. John F. Robb M.D., F.A.

Mailing Address 9 Woodcock Ln

City

Etna

State

NH

Zip Code

03750-4403

FEC ID number of contributing
federal political committee.

C

Name of Employer

Dartmouth-Hitchcock Medcl Ctr

Occupation

ADULT CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

09 / 17 / 2012

Transaction ID : FF3025AAB3160B144AE

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

583.34

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

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NAME OF COMMITTEE (In Full)

American College of Cardiology Political Action Committee

Full Name (Last, First, Middle Initial)

A. George P. Rodgers M.D., F.A.

Mailing Address 11673 Jollyville Rd
Ste 205-B

City State Zip Code
Austin TX 78759-4200

FEC ID number of contributing
federal political committee.

C

Name of Employer

Self-Employed

Occupation

ADULT CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.05

Date of Receipt

09 / 01 / 2012

Transaction ID : 411D9892B9F72E71D749

Amount of Each Receipt this Period

83.34

Full Name (Last, First, Middle Initial)

B. George P. Rodgers M.D., F.A.

Mailing Address 11673 Jollyville Rd
Ste 205-B

City State Zip Code
Austin TX 78759-4200

FEC ID number of contributing
federal political committee.

C

Name of Employer

Self-Employed

Occupation

ADULT CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.05

Date of Receipt

09 / 23 / 2012

Transaction ID : 47DBB3C6A9E60EA1A561

Amount of Each Receipt this Period

83.33

Full Name (Last, First, Middle Initial)

C. David A. Rosenbaum M.D., F.A.

Mailing Address 3625 Cherry Plum Dr

City State Zip Code
Colorado Springs CO 80920-2826

FEC ID number of contributing
federal political committee.

C

Name of Employer

Pikes Peak Cardiology

Occupation

CLINICAL CARDIOLOGY/GENERAL CARDIO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1875.06

Date of Receipt

09 / 21 / 2012

Transaction ID : 44628708818E951D937B

Amount of Each Receipt this Period

208.34

SUBTOTAL of Receipts This Page (optional)..... ►

375.01

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

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NAME OF COMMITTEE (In Full)

American College of Cardiology Political Action Committee

Full Name (Last, First, Middle Initial)

A. Robert L. Rothbard M.D., F.A.

Mailing Address 2000 Via Tuscany

City

Winter Park

State

FL

Zip Code

32789-1558

FEC ID number of contributing
federal political committee.

C

Name of Employer

Cardiology Consultants

Occupation

ADULT CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

09 / 17 / 2012

Transaction ID : 7BC8CE60E010A01EEF2

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

B. John S. Rumsfeld M.D., Ph.D

Mailing Address 250 S Dahlia St

City

Denver

State

CO

Zip Code

80246-1049

FEC ID number of contributing
federal political committee.

C

Name of Employer

Denver VA Medical Center, University o

Occupation

ADULT CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

749.97

Date of Receipt

09 / 25 / 2012

Transaction ID : 40B58DF79099823BA8A3

Amount of Each Receipt this Period

83.33

Full Name (Last, First, Middle Initial)

c. Sylvia J. B. Rushing M.D., F.A.

Mailing Address 107 Wildflower Way

City

Dothan

State

AL

Zip Code

36305-7327

FEC ID number of contributing
federal political committee.

C

Name of Employer

Self-Employed

Occupation

ADULT CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.00

Date of Receipt

09 / 30 / 2012

Transaction ID : 8245B0A88D89C6881E1

Amount of Each Receipt this Period

750.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

1833.33

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

American College of Cardiology Political Action Committee

Full Name (Last, First, Middle Initial)

A. Victor M. Salgado M.D., F.A.

Mailing Address Las Praderas #6
Bo. Pueblo

City State Zip Code
Hatillo PR 00659

FEC ID number of contributing
federal political committee.

C

Name of Employer

Centro Cardiovascular de Arecibo

Occupation

CLINICAL CARDIOLOGY/GENERAL CARDIO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

09 / 17 / 2012

Transaction ID : 19484A44FFBAF1911A4

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

B. Michael A. Scherlag M.D., F.A.

Mailing Address 4050 W Memorial Rd

City State Zip Code
Oklahoma City OK 73120-8382

FEC ID number of contributing
federal political committee.

C

Name of Employer

Oklahoma Heart Hospital

Occupation

ADULT CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

09 / 17 / 2012

Transaction ID : 587856BFAA13C27B2E8

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

c. John F. Schmedtje Jr., M.D.,

Mailing Address 2619 Avenham Ave SW

City State Zip Code
Roanoke VA 24014-1506

FEC ID number of contributing
federal political committee.

C

Name of Employer

Roanoke Heart Institute

Occupation

ADULT CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

09 / 17 / 2012

Transaction ID : E5FC3DC49C11D98A111

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

2250.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

American College of Cardiology Political Action Committee

Full Name (Last, First, Middle Initial)

A. Richard S. Schofield M.D., F.A.

Mailing Address 4121 NW 34th Dr
100277

City State Zip Code
Gainesville FL 32605-1492

FEC ID number of contributing
federal political committee.

C

Name of Employer
University of Florida-Hlth. Sci. Ctr.

Occupation
ADULT CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

09 / 17 / 2012

Transaction ID : 01ED52FBF64015BE7CE

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

B. Michael K. Schroyer RN, A.A.C.

Mailing Address 9065 Pebblepoint Cir

City State Zip Code
Zionsville IN 46077-8992

FEC ID number of contributing
federal political committee.

C

Name of Employer
Saint Vincent Heart Center of Indiana

Occupation
ADMINISTRATION

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

792.00

Date of Receipt

09 / 15 / 2012

Transaction ID : 4DDAA9020C3A2901B33F

Amount of Each Receipt this Period

88.00

Full Name (Last, First, Middle Initial)

c. James L. Sechler M.D., F.A.

Mailing Address 6525 Powers Blvd
Ste 301

City State Zip Code
Cleveland OH 44129-5461

FEC ID number of contributing
federal political committee.

C

Name of Employer
Cardiovascular Clinic, Inc.

Occupation
ADULT CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

09 / 17 / 2012

Transaction ID : 8A6F63C11EABD42AA20

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

588.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

American College of Cardiology Political Action Committee

Full Name (Last, First, Middle Initial)

A. Jackie R. See M.D., F.A.

Mailing Address 541 Riviera Ct

City

Fullerton

State

CA

Zip Code

92835-2729

FEC ID number of contributing
federal political committee.

C

Name of Employer

Self-Employed

Occupation

ADULT CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

09 / 30 / 2012

Transaction ID : BBF7E2CFDF31BBFA18F

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

B. Stuart Floyd Seides M.D., F.A.

Mailing Address 110 Irving St NW
Room Na 1240

City

Washington

State

DC

Zip Code

20010-3017

FEC ID number of contributing
federal political committee.

C

Name of Employer

MedStar Heart Institute

Occupation

ADULT CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

09 / 17 / 2012

Transaction ID : 8E8B82836366FC910B8

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

c. Charlie Willard Shaeffer Jr., M.D.,

Mailing Address 279 Via Las Palmas

City

Palm Springs

State

CA

Zip Code

92262

FEC ID number of contributing
federal political committee.

C

Name of Employer

Desert Cardiology Consultants Medical

Occupation

ADULT CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

09 / 17 / 2012

Transaction ID : D49D2ADEC7BAE964BFE

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

750.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 53 OF 79
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

American College of Cardiology Political Action Committee

Full Name (Last, First, Middle Initial)

A. Kenneth M. Shaffer M.D., F.A.Mailing Address 4314 Medical Pkwy
Ste 200

City	State	Zip Code
Austin	TX	78756-3332

FEC ID number of contributing
federal political committee.

C

Name of Employer

Children's Cardiology Associates

Occupation

PEDIATRIC CARD.

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	17	/	2012

Transaction ID : 9F706004EF188A1EAE6

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

B. Ibrahim Shah M.B.B.S.,

Mailing Address 3588 Otsego Dr

City	State	Zip Code
Okemos	MI	48864-4084

FEC ID number of contributing
federal political committee.

C

Name of Employer

Michigan State University

Occupation

INTERVENTIONAL CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	30	/	2012

Transaction ID : 1A439B00012FA9947A7

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

c. Timothy J. Shanahan D.O., F.A.

Mailing Address 8714 Spur Ln

City	State	Zip Code
Easton	MD	21601-1202

FEC ID number of contributing
federal political committee.

C

Name of Employer

Chesapeake Cardiology

Occupation

ADULT CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.30

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	29	/	2012

Transaction ID : 4CBF985F921FD36A7895

Amount of Each Receipt this Period

20.83

SUBTOTAL of Receipts This Page (optional)..... ►

520.83

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 54 OF 79

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

American College of Cardiology Political Action Committee

Full Name (Last, First, Middle Initial)

A. Marc E. Shelton M.D., F.A.Mailing Address 3700 Vanderbilt Cir
PO Box 19420

City	State	Zip Code
Springfield	IL	62711-4012

FEC ID number of contributing
federal political committee.

C

Name of Employer

Prairie Cardiovascular Consultants Ltd

Occupation

ADULT CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	17	/	2012

Transaction ID : 33936F03003BAE24BEE

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

B. John W. Shuck M.D., F.A.

Mailing Address 1100 Forrest Ave

City	State	Zip Code
Dover	DE	19904-3309

FEC ID number of contributing
federal political committee.

C

Name of Employer

Cardiology Consultants

Occupation

ADULT CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

584.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	26	/	2012

Transaction ID : 476CA822F43120A9F5C4

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

C. Norman H. Silverman M.D., F.A.

Mailing Address 806 E Greenwich Pl

City	State	Zip Code
Palo Alto	CA	94303-3416

FEC ID number of contributing
federal political committee.

C

Name of Employer

Stanford University Medical Ctr Div of

Occupation

PEDIATRIC CARD.

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	17	/	2012

Transaction ID : A4B4A34B87A61FD2360

Amount of Each Receipt this Period

500.00

SUBTOTAL of Receipts This Page (optional)..... ►

1250.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

American College of Cardiology Political Action Committee

Full Name (Last, First, Middle Initial)

A. John Rankin Sinden M.D., F.A.

Mailing Address 2916 Lake Boone Pl

City

Raleigh

State

NC

Zip Code

27608-1151

FEC ID number of contributing
federal political committee.

C

Name of Employer

Self-Employed

Occupation

ADULT CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

09 / 17 / 2012

Transaction ID : 4BC6A36983D823B7DB6

Amount of Each Receipt this Period

300.00

Full Name (Last, First, Middle Initial)

B. Narendra Singh M.D., F.A.

Mailing Address 6350 Haddington Ln

City

Johns Creek

State

GA

Zip Code

30024-5304

FEC ID number of contributing
federal political committee.

C

Name of Employer

Atlanta Heart Specialists

Occupation

ADULT CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

841.66

Date of Receipt

09 / 09 / 2012

Transaction ID : 4CF3A5F1E6FD8BB2A44E

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

C. Richard W. Snyder M.D., F.A.

Mailing Address 5514 Yolanda Ln

City

Dallas

State

TX

Zip Code

75229-6440

FEC ID number of contributing
federal political committee.

C

Name of Employer

Heart Place

Occupation

INTERVENTIONAL CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

09 / 17 / 2012

Transaction ID : 81CC8EB0A9881999B58

Amount of Each Receipt this Period

2500.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

2900.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

American College of Cardiology Political Action Committee

Full Name (Last, First, Middle Initial)

A. Michael J. Springer M.D., F.A.

Mailing Address 803 Towner Pl

City

Louisville

State

KY

Zip Code

40223-2568

FEC ID number of contributing
federal political committee.

C

Name of Employer

Medical Center Cardiologists

Occupation

ELECTROPHYSIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

374.94

Date of Receipt

09 / 25 / 2012

Transaction ID : 4B26A76509B93F9C61FF

Amount of Each Receipt this Period

41.66

Full Name (Last, First, Middle Initial)

B. John S. Strobel M.D., F.A.

Mailing Address 3407 E Olcott Blvd

City

Bloomington

State

IN

Zip Code

47401-2429

FEC ID number of contributing
federal political committee.

C

Name of Employer

Internal Medicine Associates

Occupation

ELECTROPHYSIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.00

Date of Receipt

09 / 30 / 2012

Transaction ID : 7F00E70160716E82225

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

C. Edward F. Terrien M.D., F.A.

Mailing Address 6 Lost Cove Rd

City

Colchester

State

VT

Zip Code

05446-1840

FEC ID number of contributing
federal political committee.

C

Name of Employer

Fletcher Allen Health Ctr.

Occupation

ADULT CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

09 / 17 / 2012

Transaction ID : 590B9498D0AA7BD4A0C

Amount of Each Receipt this Period

500.00

SUBTOTAL of Receipts This Page (optional)..... ►

791.66

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 57 OF 79

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

American College of Cardiology Political Action Committee

Full Name (Last, First, Middle Initial)

A. Suma A. Thomas M.D., F.A.Mailing Address 7620 Old Georgetown Rd
Apt 1214

City	State	Zip Code
Bethesda	MD	20814-6182

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Self-Employed

ADULT CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1250.04

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	28	/	2012

Transaction ID : 4F81888AC0360BE0836C

Amount of Each Receipt this Period

208.34

Full Name (Last, First, Middle Initial)

B. Andrew Van Tosh M.D., F.A.Mailing Address 100 Port Washington Blvd
Nuclear Cardiology

City	State	Zip Code
Roslyn	NY	11576-1347

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

St. Francis Hospital

ADULT CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	17	/	2012

Transaction ID : 1A199668F1D7A52E2CC

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

c. Karyl M. Vanbenthuyzen M.D., F.A.

Mailing Address 316 Prospect Dr

City	State	Zip Code
Castle Rock	CO	80108-9024

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

South Denver Cardiology Assoc PC

CLINICAL CARDIOLOGY/GENERAL CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	30	/	2012

Transaction ID : EB779A94C3FEAB2B41B

Amount of Each Receipt this Period

500.00

SUBTOTAL of Receipts This Page (optional)..... ►

958.34

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

American College of Cardiology Political Action Committee

Full Name (Last, First, Middle Initial)

A. Vijayendra K. Verma M.D., F.A.

Mailing Address 8 Cloverdale Ct

City

Hainesport

State

NJ

Zip Code

08036-5223

FEC ID number of contributing
federal political committee.

C

Name of Employer

Cardiovascular Associates of the Delaw

Occupation

INTERVENTIONAL CARDIOLOGY

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

09 / 24 / 2012

Transaction ID : 4B1D56F7-A5CB-4627-

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

B. Krishnaswami Vijayaraghavan M.B.B.S.

Mailing Address 2817 E Ludlow Dr

City

Phoenix

State

AZ

Zip Code

85032-5665

FEC ID number of contributing
federal political committee.

C

Name of Employer

Self-Employed

Occupation

ADULT CARDIOLOGY

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.06

Date of Receipt

09 / 21 / 2012

Transaction ID : 4A8F990BD6844CC95865

Amount of Each Receipt this Period

83.34

Full Name (Last, First, Middle Initial)

C. Juan Villafane M.D., F.A.

Mailing Address 1400 Willow Ave
1205

City

Louisville

State

KY

Zip Code

40204-2506

FEC ID number of contributing
federal political committee.

C

Name of Employer

Self-Employed

Occupation

PEDIATRICS

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

666.72

Date of Receipt

09 / 01 / 2012

Transaction ID : 446DBA54374CD511AEB4

Amount of Each Receipt this Period

83.34

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

1166.68

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

American College of Cardiology Political Action Committee

Full Name (Last, First, Middle Initial)

A. Robert N. Vincent M.D., C.M.

Mailing Address 2835 Brandywine Rd
Ste 300

City Atlanta State GA Zip Code 30341-5540

FEC ID number of contributing
federal political committee.

C

Name of Employer

Self-Employed

Occupation

PEDIATRIC CARD.

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1050.00

Date of Receipt

09 / 17 / 2012

Transaction ID : 3BF3A222C80BC76AF1D

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

B. Anant Kirit Vyas M.B.B.S.,

Mailing Address 1540 Florida Ave
Ste 100

City Modesto State CA Zip Code 95350-4430

FEC ID number of contributing
federal political committee.

C

Name of Employer

Valley Heart Assoc. Medical Group

Occupation

INTERVENTIONAL CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

09 / 21 / 2012

Transaction ID : B8D5024B-BD95-4499-

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

C. Thad F. Waites M.D., F.A.

Mailing Address 1017 Richburg Rd

City Hattiesburg State MS Zip Code 39402-9055

FEC ID number of contributing
federal political committee.

C

Name of Employer

Southern Heart Center

Occupation

INTERVENTIONAL CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2250.06

Date of Receipt

09 / 21 / 2012

Transaction ID : 4EBBA54568AD069672C2

Amount of Each Receipt this Period

83.34

SUBTOTAL of Receipts This Page (optional)..... ►

633.34

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 60 OF 79

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

American College of Cardiology Political Action Committee

Full Name (Last, First, Middle Initial)

A. Howard T. Walpole Jr., M.D.,

Mailing Address 31 Northumberland

City

Nashville

State

TN

Zip Code

37215-4123

FEC ID number of contributing
federal political committee.

C

Name of Employer

Self-Employed

Occupation

INTERVENTIONAL CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3750.03

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	09	/	2012

Transaction ID : 4BAF889E67B0B531D7D5

Amount of Each Receipt this Period

416.67

Full Name (Last, First, Middle Initial)

B. Mary Norine Walsh M.D., F.A.

Mailing Address 428 W 83rd Pl

City

Indianapolis

State

IN

Zip Code

46260-4905

FEC ID number of contributing
federal political committee.

C

Name of Employer

St Vincent Heart Center of Indiana

Occupation

HEART FAILURE/TRANSPLANT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

900.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	29	/	2012

Transaction ID : 47A2A581CCB9BD589651

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

C. L. Samuel Wann M.D., M.A.

Mailing Address 4776 N Cumberland Blvd

City

Milwaukee

State

WI

Zip Code

53211-1147

FEC ID number of contributing
federal political committee.

C

Name of Employer

University of Wisconsin, Madison and M

Occupation

ADULT CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	03	/	2012

Transaction ID : 1C43A057-360D-4711-

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional)..... ►

766.67

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

American College of Cardiology Political Action Committee

Full Name (Last, First, Middle Initial)

A. Carole A. Warnes M.D., F.A.

Mailing Address 1429 20th St SW

City
Rochester

State
MN

Zip Code
55902-2217

FEC ID number of contributing
federal political committee.

C

Name of Employer

Mayo Clinic

Occupation

ADULT CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

09 / 30 / 2012

Transaction ID : F34E94FC06DF9861CED

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

B. Bruce A. Watt M.D., F.A.

Mailing Address 2109 S Main Ave

City
Sioux Falls

State
SD

Zip Code
57105-3827

FEC ID number of contributing
federal political committee.

C

Name of Employer

North Central Heart Institute

Occupation

ADULT CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.06

Date of Receipt

09 / 21 / 2012

Transaction ID : 4D578C0BBB9B71713A73

Amount of Each Receipt this Period

83.34

Full Name (Last, First, Middle Initial)

c. Robert C. Wesley Jr., M.D.,

Mailing Address 8841 Montagna Dr

City
Las Vegas

State
NV

Zip Code
89134-6148

FEC ID number of contributing
federal political committee.

C

Name of Employer

Self-Employed

Occupation

ADULT CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

756.00

Date of Receipt

09 / 21 / 2012

Transaction ID : 4E2E859FB9E077A0FB3B

Amount of Each Receipt this Period

84.00

SUBTOTAL of Receipts This Page (optional)..... ►

1167.34

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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NAME OF COMMITTEE (In Full)

American College of Cardiology Political Action Committee

Full Name (Last, First, Middle Initial)

A. John Jason West M.D.

Mailing Address 3322 NW Panorama Dr

City State Zip Code
 Bend OR 97701-5461

FEC ID number of contributing
federal political committee.

C

Name of Employer

Bend Memorial Clinic

Occupation

ELECTROPHYSIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

374.94

Date of Receipt

09 / 11 / 2012

Transaction ID : 4C6EB63F7836E84F76CB

Amount of Each Receipt this Period

41.66

Full Name (Last, First, Middle Initial)

B. Steven R. West M.D., F.A.

Mailing Address 3701 S Poplar Dr

City State Zip Code
 Columbus IN 47201-4972

FEC ID number of contributing
federal political committee.

C

Name of Employer

St. Vincent Medical Group

Occupation

ADULT CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

375.01

Date of Receipt

09 / 30 / 2012

Transaction ID : 4861BA31572297CBFB50

Amount of Each Receipt this Period

41.67

Full Name (Last, First, Middle Initial)

c. Donald R. Westerhausen Jr., M.D.,

Mailing Address 52346 Spring Arbor Ct

City State Zip Code
 Granger IN 46530-6247

FEC ID number of contributing
federal political committee.

C

Name of Employer

Self-Employed

Occupation

ADULT CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

09 / 23 / 2012

Transaction ID : FE2D5B8B-1029-4DC0-

Amount of Each Receipt this Period

1000.00

SUBTOTAL of Receipts This Page (optional)..... ►

1083.33

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

American College of Cardiology Political Action Committee

Full Name (Last, First, Middle Initial)

A. Jule N. Wetherbee M.D., F.A.

Mailing Address 714 W Fox Hunt Trce

City State Zip Code
 Thiensville WI 53092-5959

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Self-Employed

ADULT CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

365.00

Date of Receipt

09 / 17 / 2012

Transaction ID : E867FA0087D202DC094

Amount of Each Receipt this Period

365.00

Full Name (Last, First, Middle Initial)

B. Michael C. Widmer M.D., F.A.

Mailing Address 2753 NE Red Oak Dr

City State Zip Code
 Bend OR 97701-8348

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Heart Center Cardiology

ADULT CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

749.97

Date of Receipt

09 / 29 / 2012

Transaction ID : 49B280A9889D4A894A33

Amount of Each Receipt this Period

83.33

Full Name (Last, First, Middle Initial)

c. B. Hadley Wilson M.D., F.A.

Mailing Address 1001 Blythe Blvd
 Ste 300

City State Zip Code
 Charlotte NC 28203-5863

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Sanger Clinic, PA

ADULT CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

09 / 17 / 2012

Transaction ID : 218E335C7F4AE428C40

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

698.33

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
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FOR LINE NUMBER:
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NAME OF COMMITTEE (In Full)

American College of Cardiology Political Action Committee

Full Name (Last, First, Middle Initial)

A. Phillip A. Wines M.D., F.A.

Mailing Address 2801 Tyne Blvd

City

Nashville

State

TN

Zip Code

37215-4533

FEC ID number of contributing
federal political committee.

C

Name of Employer

Saint Thomas Heart

Occupation

ADULT CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

09 / 20 / 2012

Transaction ID : DAA1D211-2D3C-4404-

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

B. Michael J. Wolk M.D., M.A.

Mailing Address 876 Park Ave

City

New York

State

NY

Zip Code

10075-1832

FEC ID number of contributing
federal political committee.

C

Name of Employer

New York Cardiology Associates

Occupation

ADULT CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

875.00

Date of Receipt

09 / 29 / 2012

Transaction ID : 4580BE498734C11303BD

Amount of Each Receipt this Period

125.00

Full Name (Last, First, Middle Initial)

c. Richard F. Wright M.D., F.A.

Mailing Address 1038 S Carmelina Ave

City

Los Angeles

State

CA

Zip Code

90049-5810

FEC ID number of contributing
federal political committee.

C

Name of Employer

Pacific Heart Institute

Occupation

ADULT CARDIOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1750.00

Date of Receipt

09 / 29 / 2012

Transaction ID : 4469AEE476616979BFE6

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

875.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

American College of Cardiology Political Action Committee

Full Name (Last, First, Middle Initial)

A. Lambert A. Wu M.D., F.A.

Mailing Address 1524 NW Grove Ave

City

Topeka

State

KS

Zip Code

66606-1234

FEC ID number of contributing
federal political committee.

C

Name of Employer

Cotton O'Neil Heart Center

Occupation

ECHOCARDIOLOGY/ECHOCARDIOGRAPHY

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

666.72

Date of Receipt

09 / 19 / 2012

Transaction ID : 4E7EA6B46B20E3EF15CC

Amount of Each Receipt this Period

83.34

Full Name (Last, First, Middle Initial)

B. Janet Fredal Wyman MSN, NP, A

Mailing Address 960 Westchester Rd

City

Grosse Pointe Park

State

MI

Zip Code

48230-1830

FEC ID number of contributing
federal political committee.

C

Name of Employer

Henry Ford Hospital

Occupation

CLINICAL CARDIOLOGY/GENERAL CARDIOI

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

750.06

Date of Receipt

09 / 28 / 2012

Transaction ID : 4E75B2F0224A78C5B170

Amount of Each Receipt this Period

83.34

Full Name (Last, First, Middle Initial)

C. Raymond S. Yen M.D., F.A.

Mailing Address 315 N 3rd Ave

Ste 207

City

Covina

State

CA

Zip Code

91723-1917

FEC ID number of contributing
federal political committee.

C

Name of Employer

Foothill Cardiology

Occupation

ADULT CARDIOLOGY

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

250.00

Date of Receipt

09 / 17 / 2012

Transaction ID : F95F8A1811F45B98030

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional)..... ►

416.68

TOTAL This Period (last page this line number only)..... ►

61796.27

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
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☐ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

American College of Cardiology Political Action Committee

Full Name (Last, First, Middle Initial)

A. American College of Cardiology - Admin Account

Mailing Address P.O. Box 85024

City State Zip Code
 Richmond VA 23285-5024

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

14789.64

Date of Receipt

M M / D D / Y Y Y Y Y Y
 09 12 2012

Transaction ID : 0F866238CE1084F098E

Amount of Each Receipt this Period

1142.38

Reimbursement for August Amex Fees and September Merchant Fees

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City State Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City State Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

1142.38

1142.38

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

American College of Cardiology Political Action Committee

Full Name (Last, First, Middle Initial)

A. American Express

Mailing Address PO Box 53852

City	State	Zip Code
Phoenix	AZ	85072-3852

Purpose of Disbursement
September 2012 Amex Fees

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	30	/	2012

Transaction ID : V74FA9D3530C8479F452

Amount of Each Disbursement this Period

445.35

Full Name (Last, First, Middle Initial)

B. Wells Fargo, N.A.Mailing Address C/O Nova Information Systems
7300 Chapman Hwy

City	State	Zip Code
Knoxville	TN	37920

Purpose of Disbursement
September 2012 Merchant Fees

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	04	/	2012

Transaction ID : M839CCF92C2C9ABA6352

Amount of Each Disbursement this Period

999.78

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City	State	Zip Code
------	-------	----------

Purpose of Disbursement

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
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Amount of Each Disbursement this Period

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SUBTOTAL of Disbursements This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

1445.13

1445.13

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

American College of Cardiology Political Action Committee

Full Name (Last, First, Middle Initial)

A. Allyson Schwartz for Congress

Mailing Address PO Box 2232

City	State	Zip Code
Jenkintown	PA	19046

Purpose of Disbursement
2012 General

011

Candidate Name

Allyson Y. SchwartzCategory/
TypeOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2012
☐ Primary ☒ General
☐ Other (specify) ▼

State: PA District: 13

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	28	/	2012

Transaction ID : 1F3BDEA81EE9B306CDA

Amount of Each Disbursement this Period

2500.00

Full Name (Last, First, Middle Initial)

B. Blumenauer for Congress

Mailing Address 830 NE Holladay, #105

City	State	Zip Code
Portland	OR	97232

Purpose of Disbursement
2012 General

011

Candidate Name

Earl BlumenauerCategory/
TypeOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2012
☐ Primary ☒ General
☐ Other (specify) ▼

State: OR District: 03

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	28	/	2012

Transaction ID : 7EE5904A00329751C46

Amount of Each Disbursement this Period

2500.00

Full Name (Last, First, Middle Initial)

C. Bucshon for Congress

Mailing Address PO Box 250

City	State	Zip Code
Newburgh	IN	47629

Purpose of Disbursement
2012 General

011

Candidate Name

Larry D. BucshonCategory/
TypeOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2012
☐ Primary ☒ General
☐ Other (specify) ▼

State: IN District: 08

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	28	/	2012

Transaction ID : 7FA6AA5D49976D4B2E7

Amount of Each Disbursement this Period

2500.00

SUBTOTAL of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

7500.00

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**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

American College of Cardiology Political Action Committee

Full Name (Last, First, Middle Initial)

A. Charles Boustany Jr. MD for Congress, Inc.

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	28	/	2012

Mailing Address PO Box 80126

Transaction ID : 8C01AB9265E14ABB111

City Lafayette	State LA	Zip Code 70598-0126
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Amount of Each Disbursement this Period

Purpose of Disbursement
2012 General

011
Category/ Type

2500.00

Candidate Name

Charles W. Boustany Jr.Office Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2012
☐ Primary ☒ General
☐ Other (specify) ▼

State: LA District: 03

Full Name (Last, First, Middle Initial)

B. Congressman Waxman Campaign Committee

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	28	/	2012

Mailing Address 6380 Wilshire Blvd., #1612

Transaction ID : 294EF9CBCCD1CDA09CB

City Los Angeles	State CA	Zip Code 90048
---------------------	-------------	-------------------

Amount of Each Disbursement this Period

Purpose of Disbursement
2012 General

011
Category/ Type

2500.00

Candidate Name

Henry A. WaxmanOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2012
☐ Primary ☒ General
☐ Other (specify) ▼

State: CA District: 33

Full Name (Last, First, Middle Initial)

C. Continuing a Majority Party Action Committee (CAMPAC)

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	28	/	2012

Mailing Address 5915 Eastman Avenue
Suite 100**Transaction ID : DB17C2851805B391B79**

City Midland	State MI	Zip Code 48640-6824
-----------------	-------------	------------------------

Amount of Each Disbursement this Period

Purpose of Disbursement
2012 Contribution

011
Category/ Type

5000.00

Candidate Name

Continuing a Majority Party Action Committee (CAMPAC)Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: 2012
☐ Primary ☐ General
☒ Other (specify) ▼
Contribution

State: District:

SUBTOTAL of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

10000.00

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**SCHEDULE B (FEC Form 3X)
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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

American College of Cardiology Political Action Committee

Full Name (Last, First, Middle Initial)

A. Crowley for Congress

Mailing Address 84-56 Grand Avenue

City Elmhurst	State NY	Zip Code 11373
------------------	-------------	-------------------

Purpose of Disbursement
2012 General

011

Candidate Name

Joseph CrowleyCategory/
TypeOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2012
☐ Primary ☒ General
☐ Other (specify) ▼

State: NY District: 14

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	28	/	2012

Transaction ID : E0BB373CFAB1E0AF00A

Amount of Each Disbursement this Period

2500.00

Full Name (Last, First, Middle Initial)

B. Friends of John Barrow

Mailing Address PO Box 1001

City Augusta	State GA	Zip Code 30903
-----------------	-------------	-------------------

Purpose of Disbursement
2012 General

011

Candidate Name

John Jenkins BarrowCategory/
TypeOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2012
☐ Primary ☒ General
☐ Other (specify) ▼

State: GA District: 12

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	28	/	2012

Transaction ID : 883FCD162E96FF2DE16

Amount of Each Disbursement this Period

1500.00

Full Name (Last, First, Middle Initial)

C. Gingrey for Congress, Inc.

Mailing Address PO Box U

City Marietta	State GA	Zip Code 30060
------------------	-------------	-------------------

Purpose of Disbursement
2012 General

011

Candidate Name

Phil GingreyCategory/
TypeOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2012
☐ Primary ☒ General
☐ Other (specify) ▼

State: GA District: 11

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	28	/	2012

Transaction ID : E4186EC6E04862E7D2E

Amount of Each Disbursement this Period

2500.00

SUBTOTAL of Disbursements This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

6500.00

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**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
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Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

American College of Cardiology Political Action Committee

Full Name (Last, First, Middle Initial)

A. Glacier PAC

Mailing Address 3242 Cummins Way

City	State	Zip Code
Missoula	MT	59802

Purpose of Disbursement
2012 Contribution

011

Candidate Name

Glacier PACCategory/
Type

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2012

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input checked="" type="checkbox"/> Other (specify) ▼	

State: District:

Contribution

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09		28		2012

Transaction ID : 056D7F77ED85A25EDC5

Amount of Each Disbursement this Period

5000.00

Full Name (Last, First, Middle Initial)

B. Jeff Miller for Congress

Mailing Address PO Box 126

City	State	Zip Code
Pensacola	FL	32591

Purpose of Disbursement
2012 General

011

Candidate Name

Jefferson B. MillerCategory/
Type

Office Sought:	<input checked="" type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2012

<input type="checkbox"/> Primary	<input checked="" type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

State: FL District: 01

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09		05		2012

Transaction ID : 43567371E7F5510C917

Amount of Each Disbursement this Period

2500.00

Full Name (Last, First, Middle Initial)

C. John S Fund

Mailing Address PO Box 853

City	State	Zip Code
Edwardsville	IL	62025-0853

Purpose of Disbursement
2012 Contribution

011

Candidate Name

John S FundCategory/
Type

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2012

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input checked="" type="checkbox"/> Other (specify) ▼	

State: District:

Contribution

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09		28		2012

Transaction ID : E5D404760C65CF94C44

Amount of Each Disbursement this Period

1500.00

SUBTOTAL of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

9000.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 72 OF 79

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

American College of Cardiology Political Action Committee

Full Name (Last, First, Middle Initial)

A. Kind for Congress Committee

Mailing Address 205 5th Avenue South

City La Crosse	State WI	Zip Code 54601
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Purpose of Disbursement
2012 General

011

Candidate Name

Ron KindCategory/
Type

Office Sought: ☒ House
☐ Senate
☐ President

State: WI District: 03

Disbursement For: 2012

☐ Primary ☒ General
☐ Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	28	/	2012

Transaction ID : 1D4CC9E8DF05D7C7258

Amount of Each Disbursement this Period

2500.00

Full Name (Last, First, Middle Initial)

B. Kurt Schrader for Congress

Mailing Address PO Box 3314

City Oregon City	State OR	Zip Code 97045
---------------------	-------------	-------------------

Purpose of Disbursement
2012 General

011

Candidate Name

Kurt SchraderCategory/
Type

Office Sought: ☒ House
☐ Senate
☐ President

State: OR District: 05

Disbursement For: 2012

☐ Primary ☒ General
☐ Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	28	/	2012

Transaction ID : 2C5CAEBC4C216534BD1

Amount of Each Disbursement this Period

2500.00

Full Name (Last, First, Middle Initial)

C. Lone Star Leadership PAC

Mailing Address PO Box 30844

City Bethesda	State MD	Zip Code 20824
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Purpose of Disbursement
2012 Contribution

011

Candidate Name

Lone Star Leadership PACCategory/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: 2012

☐ Primary ☐ General
☒ Other (specify) ▼ Contribution

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	28	/	2012

Transaction ID : 58C632A978A46D011AF

Amount of Each Disbursement this Period

2500.00

SUBTOTAL of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

7500.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 73 OF 79

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

American College of Cardiology Political Action Committee

Full Name (Last, First, Middle Initial)

A. Marsha Blackburn for Congress, Inc.

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09		28		2012

Mailing Address PO Box 3750

City	State	Zip Code
Brentwood	TN	37024-3750

Transaction ID : DC03D2798400EB84705Purpose of Disbursement
2012 General

011

Amount of Each Disbursement this Period

Candidate Name

Marsha BlackburnCategory/
Type

2500.00

Office Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2012
☐ Primary ☒ General
☐ Other (specify) ▼

State: TN District: 07

Full Name (Last, First, Middle Initial)

B. PAC To the Future

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09		26		2012

Mailing Address 700 13th Street, NW, Suite 600

City	State	Zip Code
Washington	DC	20005

Transaction ID : 12305E9736159A09673Purpose of Disbursement
2012 Contribution

011

Amount of Each Disbursement this Period

Candidate Name

PAC To the FutureCategory/
Type

5000.00

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: 2012
☐ Primary ☐ General
☒ Other (specify) ▼ Contribution

State: District:

Full Name (Last, First, Middle Initial)

C. Pete Stark Re-Election Committee

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09		28		2012

Mailing Address PO Box 8331

City	State	Zip Code
Fremont	CA	94537

Transaction ID : A2453FDE2D934A38D51Purpose of Disbursement
2012 General

011

Amount of Each Disbursement this Period

Candidate Name

Fortney H. Pete StarkCategory/
Type

2500.00

Office Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2012
☐ Primary ☒ General
☐ Other (specify) ▼

State: CA District: 15

SUBTOTAL of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

10000.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 74 OF 79

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

American College of Cardiology Political Action Committee

Full Name (Last, First, Middle Initial)

A. Robert Aderholt for Congress

Mailing Address PO Box 1158

City	State	Zip Code
Haleyville	AL	35565

Purpose of Disbursement
2012 General

011

Candidate Name

Robert B. AderholtCategory/
TypeOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2012
☐ Primary ☒ General
☐ Other (specify) ▼

State: AL District: 04

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	28	/	2012

Transaction ID : 282942A3D4BAA44BB32

Amount of Each Disbursement this Period

2500.00

Full Name (Last, First, Middle Initial)

B. Rodney for Congress

Mailing Address PO Box 344

City	State	Zip Code
Taylorville	IL	62568-0344

Purpose of Disbursement
2012 General

011

Candidate Name

Rodney DavisCategory/
TypeOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2012
☐ Primary ☒ General
☐ Other (specify) ▼

State: IL District: 13

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	28	/	2012

Transaction ID : 2BEFBD9CCDD2889F484

Amount of Each Disbursement this Period

2500.00

Full Name (Last, First, Middle Initial)

C. Schock for Congress

Mailing Address PO Box 10555

City	State	Zip Code
Peoria	IL	61612

Purpose of Disbursement
2012 General

011

Candidate Name

Aaron SchockCategory/
TypeOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2012
☐ Primary ☒ General
☐ Other (specify) ▼

State: IL District: 18

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	28	/	2012

Transaction ID : 73F1051972F7EBF5871

Amount of Each Disbursement this Period

2500.00

SUBTOTAL of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

7500.00

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**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 75 OF 79

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

American College of Cardiology Political Action Committee

Full Name (Last, First, Middle Initial)

A. Shore PAC

Mailing Address PO Box 3157

City	State	Zip Code
Long Branch	NJ	07740

Purpose of Disbursement
2012 Contribution

011

Candidate Name

Shore PACOffice Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2012

☐ Primary ☐ General
☒ Other (specify) ▼

State: District:

Contribution

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	28	/	2012

Transaction ID : 22116FB06F6BE0FE3E8

Amount of Each Disbursement this Period

5000.00

Full Name (Last, First, Middle Initial)

B. Ted Cruz for SenateMailing Address 815 A Brazos
Pmb 550

City	State	Zip Code
Austin	TX	78701

Purpose of Disbursement
2012 General

011

Candidate Name

Rafael Edward CruzOffice Sought: ☐ House
☒ Senate
☐ President

Disbursement For: 2012

☐ Primary ☒ General
☐ Other (specify) ▼

State: TX District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	28	/	2012

Transaction ID : C154E08B70B297E3DC5

Amount of Each Disbursement this Period

5000.00

Full Name (Last, First, Middle Initial)

C. Tim Murphy for Congress

Mailing Address PO Box 24551

City	State	Zip Code
Pittsburgh	PA	15234

Purpose of Disbursement
2012 General

011

Candidate Name

Timothy F. MurphyOffice Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2012

☐ Primary ☒ General
☐ Other (specify) ▼

State: PA District: 18

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	28	/	2012

Transaction ID : EDDDED3041B4BBBBBCB39

Amount of Each Disbursement this Period

2500.00

SUBTOTAL of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

12500.00

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**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 76 OF 79

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

American College of Cardiology Political Action Committee

Full Name (Last, First, Middle Initial)

A. Tom Reed for Congress

Mailing Address PO Box 450

City Victor	State NY	Zip Code 14564-0450
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Purpose of Disbursement
2012 General

011

Candidate Name

Thomas W. Reed II.Category/
TypeOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2012
☐ Primary ☒ General
☐ Other (specify) ▼

State: NY District: 23

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	28	/	2012

Transaction ID : 3CF803EEFF8C3D95DE4

Amount of Each Disbursement this Period

2000.00

Full Name (Last, First, Middle Initial)

B. Van Hollen for Congress

Mailing Address 10537 St. Paul St.

City Kensington	State MD	Zip Code 20895
--------------------	-------------	-------------------

Purpose of Disbursement
2012 General

011

Candidate Name

Chris Van HollenCategory/
TypeOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2012
☐ Primary ☒ General
☐ Other (specify) ▼

State: MD District: 08

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	28	/	2012

Transaction ID : B1C369D9B2457CC6C04

Amount of Each Disbursement this Period

2500.00

Full Name (Last, First, Middle Initial)

C. Voice for Freedom

Mailing Address 2700 Cumberland Parkway, Suite 150

City Atlanta	State GA	Zip Code 30339
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Purpose of Disbursement
2012 Contribution

011

Candidate Name

Voice for FreedomCategory/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: 2012
☐ Primary ☐ General
☒ Other (specify) ▼ Contribution

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	28	/	2012

Transaction ID : E94B975073607C5A6F5

Amount of Each Disbursement this Period

5000.00

SUBTOTAL of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

9500.00

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	21b		22	X	23		24		25		26
	27		28a		28b		28c		29		30b

American College of Cardiology Political Action Committee

A. Walden for Congress

Date of Disbursement

09 / 13 / 2012

Transaction ID : 8EE026204A8B56D22DF

011

Amount of Each Disbursement this Period

5000.00

Category/
Type

Disbursement For: 2012

☐ Primary ☒ General

☐ Other (specify) ▼

State: OR District: 02

Full Name (Last, First, Middle Initial)

B.

Date of Disbursement

Mailing Address

City	State	Zip Code
------	-------	----------

Purpose of Disbursement

Amount of Each Disbursement this Period

Candidate Name

Category/
Type

Office Sought:	<input type="checkbox"/>	House
	<input type="checkbox"/>	Senate
	<input type="checkbox"/>	President

Disbursement For:

☐ Primary ☐ General

☐ Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

C.

Date of Disbursement

Mailing Address

City	State	Zip Code
------	-------	----------

Purpose of Disbursement

Amount of Each Disbursement this Period

Candidate Name

Category/
Type

Office Sought:	<input type="checkbox"/>	House
	<input type="checkbox"/>	Senate
	<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State: District:

SUBTOTAL of Disbursements This Page (optional).....

5000.00

TOTAL This Period (last page this line number only).....

85000.00

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 78 OF 79

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

American College of Cardiology Political Action Committee

Full Name (Last, First, Middle Initial)

A. Barry S. Clemson M.D., F.A.

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	17	/	2012

Mailing Address 500 University Dr
Heart and Vascular Institute

City Hershey State PA Zip Code 17033-2360

Purpose of Disbursement
Refund

010

Candidate Name

Category/
Type

Transaction ID : 32242089311DA1E7429

Amount of Each Disbursement this Period

100.00

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

B. Barry S. Clemson M.D., F.A.

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	17	/	2012

Mailing Address 500 University Dr
Heart and Vascular Institute

City Hershey State PA Zip Code 17033-2360

Purpose of Disbursement
Refund

010

Candidate Name

Category/
Type

Transaction ID : 40D655800856BF820A8

Amount of Each Disbursement this Period

100.00

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

C. Barry S. Clemson M.D., F.A.

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	17	/	2012

Mailing Address 500 University Dr
Heart and Vascular Institute

City Hershey State PA Zip Code 17033-2360

Purpose of Disbursement
Refund

010

Candidate Name

Category/
Type

Transaction ID : 7A4A1D48C2D9C41B01E

Amount of Each Disbursement this Period

100.00

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

SUBTOTAL of Disbursements This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

300.00

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	21b		22		23		24		25		26
	27	X	28a		28b		28c		29		30b

American College of Cardiology Political Action Committee

A. Daniel P. Fishbein M.D., F.A.

Date of Disbursement

Mailing Address PO Box 356422
Cardiology

City	State	Zip Code
Seattle	WA	98195-6422

Transaction ID : 046303F1DAA6B59D5F6

Purpose of Disbursement	Refund
-------------------------	--------

010

Amount of Each Disbursement this Period

Candidate Name

Category/
Type

Office Sought:	<input type="checkbox"/>	House
	<input type="checkbox"/>	Senate
	<input type="checkbox"/>	President
State:	District:	

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

250.00

B.

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address

City	State	Zip Code
------	-------	----------

Purpose of Disbursement

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

Office Sought:	<input type="checkbox"/>	House
	<input type="checkbox"/>	Senate
	<input type="checkbox"/>	President
State:	District:	

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

C.

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address

City	State	Zip Code
------	-------	----------

Purpose of Disbursement	
1	2
3	4
5	6
7	8
9	10
11	12
13	14
15	16
17	18
19	20
21	22
23	24
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73	74
75	76
77	78
79	80
81	82
83	84
85	86
87	88
89	90
91	92
93	94
95	96
97	98
99	100

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

Office Sought:	<input type="checkbox"/>	House
	<input type="checkbox"/>	Senate
	<input type="checkbox"/>	President
State:	District:	

Disbursement For:

☐ Primary ☐ General

☐ Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional).....

250.00

TOTAL This Period (last page this line number only).....

550.00